LITCOIZCICO

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SECRETARY OF STATE
TAIL AHASSEE FROM

S. WARREN SEP 1 9 2017

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: ALISON DE Name of Limi	SIGN PROPERTIES, LLC				
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter	to the following:				
ALISON BALLENTINE Name of Person					
AMSON DESIGN PROPERTIE	ES, 44 C				
337 UNDERWOOD TRAI	<u>h</u>				
PALM COAST, FL 32164 City/State and Zip Code					
AMZDESIGNER & YAHOO. E-mail address: (to be used for future annual repor	COM t notification)				
For further information concerning this matter, please ca	all:				
ALISON BALLENTINE, at (3) Name of Person	Area Code & Daytime Telephone Number				
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Enclosed is a check for the following amount:					
\$25 Filing Fee	\$55 Filing Fee & Certified Copy				
INHS18 (2/14)					

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Na	me of the limited liability company: ALISON D	ES161	1 PRO	PERTIES LLC
2. (a)	337 UNDARWOOD TRAIL	_ (b) _	337 U	NDERWOOD TR
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			g address of limited liability company: te: MAY BE POST OFFICE BOX)
	PALM COAST, FL32164	 _	PALM	COAST, FL 32164
2	JUNE 9 2017 Date of filing/registration in Florida		11700	0126700
3.	Date of filing/registration in Florida	4.	Doc	ument number
5. (a)	Registered Agent and Registered Office shown on the records of the 337 UNDERWOOD TRAIL Registered Office Address (MUST BE FLORIDA STREET AL		ept. of State:	
(b)	PALM COAST ,FL			FIL 17 SEP 18 SEGRETARY TAILAHASS
	Enter name of NEW Registered Agent and/or NEW Registered O	office addre	<u>\$55</u> :	ED AN III OF STA EE, FLOR
	NEW Registered Office Address:		· <u>-</u>	28 RIDA
	337 UNDERWOOD TR	PAIL		
	PARM COAST ,FL	3216	54	
the char agent w was/we	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the ill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	he register vility comp the limited	ed office and pany, it is here d liability com	the business office of the registered by confirmed that the change(s)
Signati	ure of a member or authorized representative of a member		ALISON Printe	RALLENTINE ed or typed name of signee
the obli to mere notified	y accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p gations of my position as registered agent as provided by reflect a change in the registered office address, I he in writing of this change.	e to act in erformand for in Cha ereby confi	this capacity. e of my duties pter 605, F.S. irm that the lii	I further agree to comply with the s, and I am familiar with and accept . Or, if this document is being filed mited liability company has been
Signatur	Chion Ballertino e of Registered Agent			