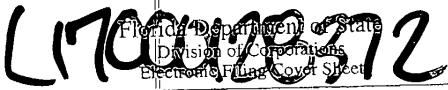
9/19/2017

Division of Corporations



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

uppits	the following statement in order	0114 or 605.0116 to change its reg	, Florid gistered	a Statutes, th office or re	ne undersigned limited liability company gistered agent, or both, in the State of	
Torida.		SG Touring LLC				
l. Nan	ne of the limited liability company					
2. (a) _	Principal office address of limited (Nate: MUST BE STREET	inbility company:	_ (o)	Aniling address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	1175 NE 125TH STREET, S	t		1175 NE	125TH STREET, STE. 215	
	NORTH MIAMI, FL 33161	<u> </u>	_		MIAMI, FL 33161	
	06/12/2017		_ -	L170001	28372	
3.	Date of filing/registration	in Florida	4.		Document number	
5 (a)	OCTAVE, DIEUSON				_	
5. (a)	Registered Agent and Registered Office st	iewa on the records of	(the Flori	ia Dept of Stat	- : :	
	Registered Office Address (MUST RE	FLORIDA STREET	ADDRE	221	ـ 	
	PEMBROKE PINES		_L 3302	7		
(Ն)	Enter name of NEW Registered Apent a	nd/or <u>NEW Registers</u>	n Office	address;		
	eResidentAgent, Inc.					
	NEW Registered Office Address:					
	236 E 6th Ave.			 	_ :-	
	Tallahassee	<u> </u>	L_3230	03	_	
the ch agent was/w the ar	ange or changes are made, the Flor will be identical. Or, in the case of were authorized by an affirmative vo- ticles of organization or the operation Discussion Octave	the street address to the member of the memb	liability s of the he limite	company, it	clorida, it is hereby confirmed that after ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in ompany. Stave Printed or typed name of signee	
I here provisithe of to me notific	bligations of my position as registed rely reflect a change in the register ed in writing of this change.		ngree to tie perfo ded for I hereb	act in this co rmance of m in Chapter 6 y confirm the	ipacity. I further agree to comply with the y duties, and I am jamiliar with and accept to 5. F.S. Or, if this document is being filed at the limited liability company has been	
	ture of Registered Agent	<u> </u>				
	Division of C	 orporations). Box 6	327● Tallah 825.00	nassee, FL 32314	

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