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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name: REGISTERED AGENTS INC.

Account Number: 120090000081 Phone: (307)200-2803 Fax Number: (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:____

- S

LLC REGISTERED AGENT CHANGE LAUREL CLEARWATER VENTURES, LLC

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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	ame of the limited liability company: Laurel Clo	earwater Vo	entures, LLC	
า		2803 GULF TO BAY BLVD.	(b) 2803 GULF TO BAY BLVD. Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	(11)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			
		#460	#460		
		CLEARWATER, FL 33759	CLEARV	VATER, FL 33759	
		06/27/17	L170001	139228	
3.		Date of filing/registration in Florida	4.	Document number	
5.	(a)	Siero, Rafael			
Э.	(11)	Registered Agent and Registered Office shown on the records of t	the Florida Dept. of State		.3
		2803 GULF TO BAY BLVD.		2 TOP 078	ລ້ ລ ວ
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				<u> </u>	
		#460		15.50 15.50	- inches
		CLEARWATER FL	33759		p
	(b)	Registered Agents Inc. Enter name of NEW Registered Agent and/or NEW Registered	33759		
		7901 4th St N		-	
		NEW Registered Office Address:			
		STE 300		-	
		St. Petersburg, FL.	33702	-	
the ag was the first the f	e chasemas/we art Signa here ob mer	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lie ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the law authorized representative of a member of a member of a member of a member of all statutes relative to the proper and complete ligations of my position as registered agent and agricultural of the proper and complete ligations of my position as registered agent as provide the proper and complete ligations of this change in the registered office address, I will have a change of this change. Bill Havre - Assistantee will be a change in the registered agent and complete address of this change.	the registered office ability company, it is of the limited liability con Riley Park ree to act in this cap performance of my difference of the performance of the p	e and the business office of the shereby confirmed that the chy company or as otherwise propany. Printed or typed name of signee acity. I further agree to computaties, and I am familiar with 5. F.S. Or, if this document is	e registered nange(s) ovided in ovided in oliv with the and accept being filed
S	رسد ignati	are of Registered Agent	 ,		