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18 SEP 17 PM 5: 34

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COVER LETTER

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. N	ame of the limited liability company:So_flo_9	100 ming	lle.	, , , , , , , , , , , , , , , , , , ,
2. (a)				
· · · · ·	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of lit	nited liability company: POST OFFICE BOX)
	2428 Taylor Street #3	24	28 TAYLOR S	+2EE1 #3
	Hollyword Fl. 33020	<u> </u>	Mywood Fi	. 33020
	07/31/2017		2 170001	
3.	Date of filing/registration in Florida	4.	Document numb	oer
5. (a)	Ibis Riz 2428 TAYLOR STROT	H3 H0/144	000 Fl. 3302	
	Registered Agent and Registered Office shown on the records of the	e Florida Dept, of St	ate:	
	D. C. LON	NA PERO		18
	Registered Office Address (MUST BE FLORIDA STREET_AL			S
	2429 TAYLOR STILET #3		_	SEP 17 PH
	Hollywood .FL	33020	_	1 Im
				무 다
(b)	Enter name of NEW Registered Agent and/or NEW Registered O	ffice address:	_	SEP 17 PM 5: 34
	7600 NW 474 PL #201		_	
	NEW Registered Office Address:			
	Margate		_	
	Margate			
	MARGATE .FL	33063		
the chagent was/w	imited liability company is not organized under the laws ange or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the liability of a member or authorized representative of a member	ne registered offi ility company, it the limited liabil mited liability co	ce and the business is hereby confirmative company or as	s office of the registered ed that the change(s) otherwise provided in
_	1			_
provis the ob- to mer	hy accept the appointment as registered agent and agrecions of all statutes relative to the proper and complete poligations of my position as registered agent as provided ely reflect a change in the registered office address. I he d in writing of this change.	erformance of my for in Chapter 60 rehy confirm tha	gacty. Thriner a v duties, and I am j 05, F.S. Or, if this at the limited liabil.	gree to comply with the amiliar with and accept document is being filed ity company has been

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Signature of Registered Agent