L17000164160

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COVER LETTER

TO: Registration Section Division of Corporations	•	
	ame of Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered O	ffice Change and fee(s) are submitted for filing.	
Please return all correspondence concerning t	this matter to the following:	
OVY BAUMI Name of Person		
Stellar Communit	765	
2860 W. State Rd. 84 Address	t Suite 118	
Ft. Laucler dale, FL. City/State and Zip Code	33312	
E-mail address: (to be used for future an	N. COM Inual report notification)	
For further information concerning this matter	r, please call:	
LIZ Metott	at (95H) 671.1345	
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:		
S25 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. N	ame of the limited liability company: Stellar Communities LLC.
2. (a)	28100 W State Rd 84 Ste. 118 (1) 2860 W. State Rd B4 Ste. 1
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Ft. Laurierdale, FL. 33312 Ft. Lauderdale, FL. 33312
	08/01/2017 L17000164160
3.	Date of filing/registration in Florida 4. Document number
5. (a)	Michael NWAK
,	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	Dne SE Third Avenue
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	Suite 1100
	Ft. Lauderdale FL 33309
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	Signature of the way o
	28UD W. State Rd. 84
	NEW Registered Office Address:
	Suffe 11%
	Ft. Lauderdale FL 33312
10.1 1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
the cha	imited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after inge or changes are made, the Florida street address of the registered office and the business office of the registered
agent v	vill be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) are authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in
the arti	cles of organization or the operating agreement of the limited liability company.
Signat	Carry Baum
	ture of a member or authorized representative of a member Printed or typed name of signee
r nerec provisi the ahl	by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ons of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept in the property of the
to mere notified	igations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed By reflect a change in the registered office address, I hereby confirm that the limited liability company has been I in writing of this change.
<	- Similar Simi
Signatu	re of Registered Agent