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35 Group L.L.C.				
e and fee(s) are submitted for filing.				
o the following:				
				
P_				
5				
notification)				
H:				
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Area Code & Daytime Telephone Number				
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Enclosed is a check for the following amount:				
□ \$55 Filing Fee & Certified Copy				

INHS18 (2/14)

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: <u>Exodus</u>	Hole	Lings Chroup	L.L.C.	
2. (a)			,		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing addres	s of limited hability cor ** BE POST OFFICE B	npany:
	1010 Parket, Gunit		1010 Park	Ct. G. Ur	nit
	Safety Harbor, FL 34695		Safety Ha	(box, FL =	3469 <u>5</u>
	9/21/2017		LIZOC	196061	
3.	Date of filing/registration in Florida	4.	Document		-
5. (a)	Jarett Thorne				}
	Registered Agent and Registered Office shown on the records of the	he Florida l	Dept, of State:		1
	2171 Lagar DC Registered Office Address MUST BE FLORIDA STREET A	nnneces			
	Registered Office Address	<u>DDRESSJ</u>			<u>□</u>
					SEC VISIO
	Dunedin Fr.	34109	18	JAN	2 2 2 2 2 3 4 4
(b)				16	787
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u>	Office addr	ess'	2	300
	Clearwater Business law, 1 NEW Registered Office Address:			<u>ب</u> 	Y OF STATE CORPORATIONS
	1799 n Belcher Road, Su	Ite B			
	Clearwater .FL	3370	e 5		
the cha agent v was/we the arti	mited liability company is not organized under the law nge or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members of deslot organization or the operating agreement of the une of a member or authorized representative of a member by accept the appointment as registered agent and agree	the registed billity confitted limited lia	ered office and the burpany, it is hereby cored liability company bility company. Silve Printed or ty in this canacity. I first	siness office of the offirmed that the char or as otherwise proped name of signee they awaye to connil	registered ange(s) vided in
provisi the obl to merc	oils of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address. I have time of this change.	performai I for in Cl iereby coi	ice of my duties, and iapter 605, F.S. Or, i ifirm that the limited	I am Jamiliar with if If this document is h liability company h	ind accept peing tiled as been
Sumatu	re of Registered Agent				,