L17000209828

(Requestor's Name)				
(Address)				
(Address)				
(City/	State/Zip/Phone	e #)		
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



800355803178

12/08/20--01027--020 **25.00

MA 2 3 2021 S. YOUNG



COVER LETTER

FO: Registration Section Division of Corporations	
Superior Lodge, LLC SUBJECT:	
Name of I	Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Ch	nange and fee(s) are submitted for filing.
Please return all correspondence concerning this mat	ter to the following:
Jennifer Scher	
Name of Person	
SSG Commercial LLC	
Firm/Company	
204 N Howard Avenue	
Address	
Tampa, FL 33606	
City/State and Zip Code	
lynn@ssgeommercial.com	
E-mail address: (to be used for future annual re	port notification)
For further information concerning this matter, pleas	e call:
Jennifer Scher at	813 485-9025 ()
Name of Person	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amount	unt:
■ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy

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: Superior Lodge	LLC		
2. (a)	204 N Howard Avenue, Tampa, FL 33606		(b) 204 N H	Ioward Avenue, Tampa, FL 33606
- . ((1)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	204 N Howard Avenue, Tampa, FL 33606		204 N H	oward Avenue, FL 33606
	10-10-2017		L1700020	9828
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	Thomas Chad Horne			
. (-,	Registered Agent and Registered Office shown on the records Thomas Chad Horne	of the Flor	rida Dept. of S	tate:
	Registered Office Address (MUST BE FLORIDA STREE 289 Bayside Drive, Suite 210,	T ADDRE	<u>:SS)</u>	202E
	Clearwater Beach	FL 33767		7028 DEC
(b)	SSG Commercial LLC			
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u> SSG Commercial LLC	<u>ea Omce</u>	nddress:	
	NEW Registered Office Address:			-
	204 N Howard Avenue,			
	Tampa, I	FL		<u> </u>
change agent v was/we the arti	imited liability company is not organized under the le or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members color of organization or the operating agreement of the members of a manufactor authorized representative of a member by accept the appointment as registered agent and a	he registed liability is of the limited Dispersion of the liability of the limited Dispersion of the liability of	ered office a company, it imited liabil d liability co avid Scher	ind the business office of the registered is hereby confirmed that the change(s) lity company or as otherwise provided in ompany. Printed or typed name of signee spacity. I further agree to comply with the
provisi the obl to mere	ons of all statules relative to the proper and completing ignitions of my position as registered agent as provided reflect a change in the registered office address. It is writing of this change.	le perfor ded for it I hereby	mance of m Chapter 60 confirm tha	v duties, and I am familiar with and accept 95, F.S. Or, if this document is being filed at the limited liability company has been
Signatu	re of Register Age			
		N. D. 174	995 T.U.	nace IN 22214
	Division of Corporations • P.O FILING			assee, FL 32314

. . . .