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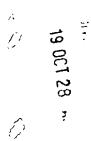
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COVER LETTER

Division of Corporations					
4742 GROVE STREET	LLC				
SUBJECT:	<u> </u>				
	Name of Limited Liability Company				
Dear Sir or Madam:					
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.				
Please return all correspondence concerning	ng this matter to the following:				
Ryan S. Shipp					
Name of Person					
Law Office of Ryan S. Shipp PLLC					
Firm/Company					
814 W. Lantana Road, Suite 1					
Address					
Lantana, FL 33462					
City/State and Zip Co	ode				
ryan@shipplawoffice.com					
E-mail address: (to be used for futur	e annual report notification)				
For further information concerning this m	atter, please call:				
Ryan S. Shipp	561 699-0399				
	at ()				
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	Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Enclosed is a check for the follo	osed is a check for the following amount:				
💯 \$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.

riorida	4742 GROV	E STRE	EET LLC	
	me of the limited liability company: 1921 S. Dixie Hwy			Dixie Hwy
(a) ₋	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(())	Hailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	West Palm Beach, FL 33407		West Pa	alm Beach, FL 33407
	01/11/2018		L180000	09186
. (a)	Date of filing/registration in Florida Adam R. Seligman, Esq.	4.		Document number
. (a)	Registered Agent and Registered Office shown on the records of 4420 Beacon Circle	the Florida	a Dept. of State	- ::
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	<u>S)</u>	19 0
	West Palm Beach	33407	7	C1 28
· (b)	Law Office of Ryan S. Shipp PLLC			19 OCT 28 AM 9: 47
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> 814 W. Lantana Road	1 Office ad	ldress:	5 ⁹
	NEW Registered Office Address: Suite 1			-
	Lantana , Fi	33462	2	-
he cha igent w vas/we	imited liability company is not organized under the la inge or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited I ere authorized by an affirmative vote of the members cles of organization or the operating agreement of the	f the regi iability c of the lin : limited	stered office ompany, it is nited liability	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in inpany.
Signat	ture of a member or authorized representative of a member			Printed or typed name of signee
l herel provisi he obl o mere	by accept the appointment as registered agent and agens of all statutes relative to the proper and complete igations of my position as registered agent as provide all reflects change in the registered office address. I	ree to ac e perforn ed for in hereby c	t in this cap ance of my Chapter 605 confirm that	acity. I further agree to comply with the duties, and I am familiar with and accep i, F.S. Or, if this document is being filed the limited liability company has been

Signature of Registered Agent