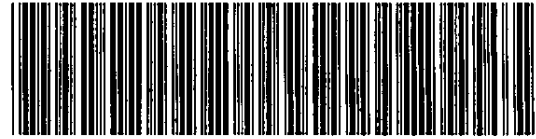


L180000037299



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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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O SIMMONS
MAY 09 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 15 PUMPKIN CAY LLC L18000037299
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 this matter to the following:

David L. Goodman
Name of Person

15 PUMPKIN CAY LLC
Firm/Company

24 Dockside Lane, PMB 457
Address

Key Largo, FL 33037
City/State and Zip Code

davidlewisgoodman@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David L. Goodman at (571) 233-0066
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:

\$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. Name of the limited liability company: 15 PUMPKIN CAY LLC

2. (a) 15 Pumpkin Cay Road (b) 24 Dockside Lane

Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)

Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)

Unit B
Key Largo, FL 33037

PMB 457
Key Largo, FL 33037

3. 02/09/2018 Date of filing/registration in Florida 4. L18000037299 Document number

5. (a) Goodman, David L.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

15 PUMPKIN CAY LLC
Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**
15 Pumpkin Cay Road, Unit B
Key Largo, FL 33037

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

15 PUMPKIN CAY LLC
NEW Registered Office Address:
24 Dockside Lane, PMB 457
Key Largo, FL 33037

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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
Signature of a member or authorized representative of a member

David L. Goodman
Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]
Signature of Registered Agent