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SECRETARY OF STATE SECRETARY SEE, FLORIDA

COVER LETTER

7

INHS18 (2/14)

	ion Section of Corporations							
SURJECT:	Say	thern	Clips	FL301	LLC.			
SUBJECT: Southern Clips FL301 LLC Name of Limited Liability Company								
	Dear Sir or Madam:							
The enclosed Reg	The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.							
Please return all o	correspondence c	oncerning this m	atter to the followi	ng:				
	Dhayne Name of	Mal.	one_					
South	Firm/Con	ips FL	301 LLC					
3910	Burty Address	on 5t (SE Sui	te 101				
Grand	Rapid City/State and	J Zip Code	49546					
<u>dyan</u> E-mail addr	ess: (to be used f	one de ve	No price wit.	C0 M				
For further information concerning this matter, please call:								
Shayne Malone at 305, 401, 5387								
7	lame of Person	_	Area	Code & Daytime Tel	ephone Number			
Registrati Division Clifton B 2661 Exe	C/COURIER AD ion Section of Corporations uilding cutive Center Ci ee, Florida 3230	rcle	Registration of P.O. Box (f Corporations				
Enclosed is a check for the following amount:								
⊠ \$25 Fi	ling Fee		🗓 \$55 Filing	g Fee & Certified Cop	ру			

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:	outhern	Clips	FL'301 LI	_ C
2 (a)	(b)		
2. (a) Principal office address of limited liability ((Note: MUST BE STREET ADDRE		Mailing	g address of limited liability co e: MAY BE POST OFFICE	
18247 Fines B1	vd.	3910	Burton St	SE
Fembroke Pines FL	3'3029	Gran	Burton St 101 2 Rapids A	N 4954
2-27-18		_ 1°	800005276	3
3. Date of filing/registration in Flori		Docu	iment number	
5. (a) Shayne R. Ma	Llone			
Registered Agent and Registered Office shown on t Registered Office Address (MUST BE FLORII				
2980 McFavl	ane Rd		SEC SEC	
Miami		3133	JUN 15	FILED
(b) Enter name of NEW Registered Agent and/or NEW NEW Registered Agent and and/or NEW Registered Agent and		Iress:	JUN 15 PH 3- 47 CRETARY OF STATE LLAHASSEE, FLORIDA	
NEW Registered Office Address: Pembroke Fine	s FL 3	30 29		
	, FI			
If the limited liability company is not organized us the change or changes are made, the Florida street agent will be identical. Or, in the case of a Florida was/were authorized by an affirmative vote of the he articles of organization or the operating agrees.	t address of the regis la limited liability co members of the lim	tered office and mpany, it is here ited liability com jability company	the business office of the by confirmed that the chapany or as otherwise pro	registered ange(s) wided in
Signature of a member or authorized representative of a m	ember	Printe	hanne Mal	<u> </u>
I hereby accept the appointment as registered ag provisions of all statutes relative to the proper an the obligations of my position as registered agent on merely reflect a change in the registered office notified in region of his change	ent and agree to act of complete performs as provided for in C address, I hereby co	in this canacity	I further norse to comm	ly with the
Signature of Registered Agent				