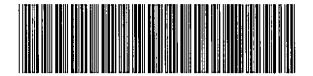
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PICK-UP WAIT MAIL							
(Business Entity Name)							
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COVER LETTER

TO:

INHS18 (2/14)

	sistration Section ission of Corporations			
SUBJECT:	EX3-61CK, LLC			
		me of Limited Lia	bility Company	
Dear Sir or	Madam:			
The enclose	ed Registered Agent/Registered Of	fice Change and for	ce(s) are submitted for filing.	
Please retur	m all correspondence concerning th	nis matter to the fo	ollowing:	
PETER D H	ALL			
	Name of Person		_	
EX3-61CK,	LLC			
	Firm/Company		_	
4702 MAGN	NUM DR			
	Address		_	
FT PIERCE.	. FL 34981			
	City/State and Zip Code		_	
pete.hallmet	als@gmail.com			
E-mai	l address: (to be used for future an	nual report notific	ation)	
For further	information concerning this matter	, please call:		
Karen Kinbe	erger	561 at (747-8785	
	Name of Person		Area Code & Daytime Telephone Number	
Reg Div P.C	gistration Section Vision of Corporations D. Box 6327 Iahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enc	closed is a check for the following	g amount:		
a 9	S25 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. N	ame of the limited liability company: EX3-61CK, LL	.C		
			(b)	
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address	of limited liability company: BE POST OFFICE BOX
	340 ROYAL PALM WAY, SUITE 100		340 ROYAL PALM WA	Y, SUITE 100
	PALM BEACH, FL 33480		PALM BEACH, FL 3348	80
	03/29/2018		L18000080246	
3.	Date of filing/registration in Florida	4.	Document nu	umber
5. (a)			
(41	Registered Agent and Registered Office shown on the records	of the Flori	da Dept, of State:	
	J. CARTER RANDOLPH, II			
	Registered Office Address	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		
	340 ROYAL PALM WAY, SUITE 100			2020
	PALM BEACH	FL_33480		2020 MAR 12
				12
(b)				AN 10: 07
	Enter name of NEW Registered Agent and/or NEW Register	red Office a	address:	<u>ō</u>
	PETER D. HALL			07
	NEW Registered Office Address:			
	4702 MAGNUM DR			
	FORT PIERCE	FL 34981		
		<u> </u>		
chang agent was/w	limited liability company is not organized under the le or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members ticles of organization or the operating agreement of the street of the stre	he registe liability of s of the line limited	red office and the business company, it is hereby confi mited liability company or	s office of the registered irmed that the change(s)
Sign	ature of a member or authorized representative of a member	Printed or type	ed name of signee	
provis the ob to me	by accept the appointment as registered agent and a cions of all statutes relative to the proper and comple- digations of my position as registered agent as provid- rely reflect a change in the registered office address. In writing of this change.	gree to ac le perforn led for in I hereby (ct in this capacity. I furthe nance of my duties, and La Chapter 605, F.S. Or, if t confirm that the limited lia	er agree to comply with the am familiar with and accept this document is being filed ability company has been
Signat	ure of Registered Agent			