## L18000089400

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## COVER LETTER . . . .

TO:	Registration Section Division of Corporations					
SUBJE	PS Noho Three, LLC					
O DO	Name of Limited Liability Company					
Dear Si	r or Madam:					
The enc	losed Registered Agent/Registered Offic	e Change and	fee(s) are submitted for filing.			
Please r	eturn all correspondence concerning this	matter to the	following:			
Georg	e J. Peterson					
	Name of Person		_			
PS No	ho Three, LLC					
	Firm/Company	· · · · · · · · · · · · · · · · · · ·	<del></del>			
1727 V	N. Cypress Street					
	Address		<del>_</del>			
Tampa	a, FL 33606					
	City/State and Zip Code		<del>_</del>			
george	e@southroof					
E-	mail address: (to be used for future annu	al report notif	ication)			
For furt	her information concerning this matter, p	olease call:				
George	e J. Peterson	813 _at (	251-5252			
	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	Re <sub>l</sub> Div P.C	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 dahassee, Florida 32314			
Enclosed is a check for the following amount:						
	■ \$25 Filing Fee	□ \$5	5 Filing Fee & Certified Copy			
INHS18	(2/14)					

## 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	ime of the limited liability company: PS Noho The	ree, LL(			
2. (a)	1727 W.Cypress Street	(b	1727 W. Cypress Street		
(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(".	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	Tampa, FL 33606	<del>_</del> .	Tampa, FL 33606		
	April 9, 2018		L18000089400		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	Anthony M. Everett				
). (ii)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
	5005 Interbay Boulevard		= 7		
	Tampa .FL	33611			
(b)	George J.Peterson				
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office ado	ress:		
			7010 L. L. L. L. 108		
	NEW Registered Office Address:				
	1727 W. Cypress Street				
	Tampa , Fl.	33606			
16.1 3		<i>(</i> * . 1			
the cha agent w was/we	imited liability company is not organized under the law inge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	the regis ibility co f the lim limited li	tered office and the business office of the registered impany, it is hereby confirmed that the change(s) ted liability company or as otherwise provided in ability company.		
Signat	ture of a member or authorized representative of a member		rge J. Peterson, Trustee  Printed or typed name of signee		
I herel provisi the obl to mere notified	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I have itin scritting of this change.	performa I for in C	in this capacity. I further agree to comply with the ince of my duties, and I am familiar with and accept hapter 605, F.S. Or, if this document is being filed		