## 118000136189

(Red	questor's Name)			
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(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
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<u>-</u> -		. <u>-</u>		
(Do	cument Number)			
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2020 JUL 22 MAII: 37

## **COVER LETTER**

TO:	Registration Section Division of Corporations				
SUBJ	600 N. JACKSON RD. I, LLC.				
Name of Limited Liability Company					
Dear S	Sir or Madam:				
The cr	nclosed Registered Agent/Registered C	Office Change and fo	ee(s) are submitted for filing.		
Please	return all correspondence concerning	this matter to the fo	ollowing:		
GARY	W. PEAL, ESQ.				
	Name of Person		_		
BERL	IN PATTEN EBLING, PLLC				
	Firm/Company		_		
3700 S	. TAMIAMI TRAIL SUITE 200		_		
	Address		_		
SARA	SOTA, FL 34239				
	City/State and Zip Code	;			
gpeal@	gberlinpatten.com				
	E-mail address: (to be used for future a	nnual report notific	ation)		
For fu	rther information concerning this matte	er, please call:			
GARY	W. PEAL, ESQ.	941 at (	954-9991		
	Name of Person		Area Code & Daytime Telephone Number		
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
	Enclosed is a check for the following	ng amount:			
	■ \$25 Filing Fee	☐ \$55 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.

2. (a)	2036 BISPHAM RD., SARASOTA, FL 34231	(b) 203	(b) 2036 BISPHAM RD., SARASOTA, FL 34231		
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	5/31/2018	L180	90136189		
3. 5. (a	Date of filing/registration in Florida CORPORATION SERVICE COMPANY	4.	Document number		
<i>J.</i> (a	Registered Agent and Registered Office shown on the records of Registered Office Address  (MUST BE FLORIDA STREET)	of State:			
	TALLAHASSEE	12301-2525	2029 JUL 22		
(b)	BERLIN PATTEN EBLING, PLLC  Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ed Office address:	22 AH II: 3		
	NEW Registered Office Address: 3700 S. TAMIAMI TRAIL, SUITE 200	·	<u> </u>		
	SARASOTA	1. 34239			
chang agent was/w	limited liability company is not organized under the lace or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lacere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	e registered off iability compan of the limited legistering limited liability.	ice and the business office of the registered y, it is hereby confirmed that the change(s) iability company or as otherwise provided in		
Sign	ature of a member or authorized representative of a member		Printed or typed name of signee		
the obt to men notific BEF BY:	eby accept the appointment as registered agent and agesions of all statutes relative to the proper and complete digations of my position as registered agent as providerely reflect a change in the registered office address. It is writing of this change.  RLIN PATTEN EBLING PIDE  ute of Registered Agent FAMIE A FRLING	gree to act in this performance of the performance	to an acceptant of the state of		

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FILING FEE: \$25.00