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MAR 24 2020 S. YOUNG

## **COVER LETTER**

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:    Court   Brian Address	TO: Registration Section Division of Corporations			
Please return all correspondence concerning this matter to the following:    Control Club Or Address   Street Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314   Since Pollow P.O. Box 6327 Tallahassee, FL 32314   Address Street, Suite 810   Since Pollow P.O. Box Matter (Suite 810   Pollow P.O. Box Matter (Suite 810   Pollow P.O. Box 6327 Tallahassee, FL 32314   Since Pollow P.O. Box Matter (Suite 810   Pollow P.O. Box 6327 Tallahassee, FL 32314   Since Pollow P.O. Box 6327 Tallahassee, P.O. Box 6327 Tallahassee, FL 32314   Since Pollow P.O. Box 6327 Tallahassee, P.O. Box 63				
Please return all correspondence concerning this matter to the following:    Control	Dear Sir or Madam:			
Name of Person  Next Lave Padiths CCC  Firm/Company  121 Country Club Dr  Address  Sinta Posa Buly FC 32459  City/State and Zip/Code  Activ/State and Zip/Code  Activ/State and Zip/Code  Activ/State and Zip/Code  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Cole Huffer  Name of Person  Area Code & Daytime Telephone Number  Mailing Address:  Registration Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314  The Centre of Tallahassee 2415 N. Montroe Street, Suite 810	The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.			
Next Wave Parting West Water	Please return all correspondence concerning this matter to the following:			
Firm/Company  121 Country Cleb Dr  Address  Surfa Rosa Bell FC 32 459  City/State and Zip/Code  Permail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Cole Huffer Name of Person  Mailing Address: Registration Section Division of Corporations P.O. Box 6327  Tallahassee, FL 32314  Possa Bell FC 32 459  Registration Section Division of Corporations P.O. Box 6327  Tallahassee, FL 32314  The Centre of Tallahassee  2415 N. Monroe Street, Suite 810	Name of Person			
Address  Signature Rosa Buly F2 32469  City/State and Zip/Code  Permail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Cole Huffer  Name of Person  Mailing Address:  Registration Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314  Area Code & Daytime Telephone Number  Registration Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314  The Centre of Tallahassee  2415 N. Monroe Street, Suite 810	Wext Wave Paditing CCC Firm/Company			
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:    Cole	121 Country Club Pr Address			
For further information concerning this matter, please call:  Cole Huffer  at (850) 842 - 0432  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 Tallahassee, FL 32314	Synta Rosa Beh, FZ 32469 City/State and Zip/Code			
Name of Person  Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Area Code & Daytime Telephone Number  Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	E-mail address: (to be used for future annual report notification)			
Name of Person  Area Code & Daytime Telephone Number  Mailing Address:  Registration Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314  Area Code & Daytime Telephone Number  Street Address:  Registration Section  Division of Corporations  The Centre of Tallahassee  2415 N. Monroe Street, Suite 810	For further information concerning this matter, please call:			
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Registration Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314  Registration Section  Division of Corporations  The Centre of Tallahassee  2415 N. Monroe Street, Suite 810	Name of Person Area Code & Daytime Telephone Number			
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810				
P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810	-0			
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810				
Tallahassee, FL 32303	Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810			
	Tallahassee, FL 32303			

☐ \$55 Filing Fee & Certified Copy

Enclosed is a check for the following amount:

\$25 Filing Fee

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 N.	Name of the limited liability company: Next Wave	Paluthy, LLC.
1. Na 2. (a)	(a) 20 troot )r 121 (ountry Club Dr (b)	121 Country Club Dr
z. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Santa Rosa Beach, FC
	32459	32459
		1.100
3.	Date of filing/registration in Florida 4.	<i>L 180</i> 00160585  Document number
		Bocament namoci
5. (a)	(a) Registered Agent and Registered Office shown on the records of the Florida Dept.	of State:
	· · · · · · · · · · · · · · · · · · ·	
	20 Brock Pr. SPB, Ft 3243 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
	Barta Rosa Beach Fe 20 Book	المعتب بوران
	Santa Risa Beach FL 3245	7 7 N
	Janta Wisk Beach FL 35 75	7
(b)	(b) Cole Huffer	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(0)	Enter name of NEW Registered Agent and/or NEW Registered Office address:	<b>一</b>
		220.00
	121 Country Club Dr. Sinta 1 NEW Registered Office Address:	Rosa Beh, FC 12939
	121 Country Clark Pr	
	Santa Rosa Beach FL 3245	'a
	SANTA Kosa Beach, FL 3293	<del></del>
change agent v was/we the arti	the limited liability company is not organized under the laws of the State inge or changes are made, the Florida street address of the registered off ant will be identical. Or, in the case of a Florida limited liability compans/were authorized by an affirmative vote of the members of the limited lability articles of organization or the operating agreement of the limited liability articles of a member or authorized representative of a member	ice and the business office of the registered by, it is hereby confirmed that the change(s) liability company or as otherwise provided in
provisi the obl to there natified	ereby accept the appointment as registered agent and agree to act in this visions of all statutes relative to the proper and complete performance of obligations of my position as registered agent as provided for in Chapte hereby reflect a diange in the registered office address, I hereby confirmified in writing of this change.  The change in the change in the registered of the confirming of this change.	is capacity. I further agree to comply with the of my duties, and I am familiar with and accept er 605, F.S. Or, if this document is being filed a that the limited liability company has been
	Division of Corporations P.O. Box 6327 • Ta	llahassee, FL 32314

FILING FEE: \$25.00