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## COVER LETTER

TO:	Registration Section Division of Corporations							
CHEL	VGF SSS SGC 3170 & 325	7 LLC						
3000	Name of Limited Liability Company							
Dear S	Sir or Madam:							
The er	nclosed Registered Agent/Registered Off	ice Change and fe	ee(s) are submitted for filing.					
Please	return all correspondence concerning th	is matter to the fo	llowing:					
Stepl	nanie Gibson							
	Name of Person	· · · · · ·	-					
Marti	nez Law, P.A.							
· · · · ·	Firm/Company		-					
2818	Cypress Ridge Blvd., Ste 230							
	Address		-					
Wesl	ey Chapel, FL 33544							
	City/State and Zip Code		-					
sgibs	on@martinezlawfla.com							
	E-mail address: (to be used for future and	nual report notific	ation)					
For fu	rther information concerning this matter	, please call:						
Step	hanie Gibson	813 at (	8034887					
	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	Regi Divi P.O.	stration Section sion of Corporations Box 6327 ahassee, Florida 32314					
	Enclosed is a check for the following 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.

. Na	ime of the limited liability company: VGF SSS SC	GC 3170	0 & 3257 L	LC	
. (a)	5020 Millpond Rd		(b) 5020 Millpond Rd		
. (,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	`		Mailing address of limited liability co (Note: MAY BE POST OFFICE a	
	Unit 3170	<del></del>	Unit 317	<u>'0</u>	<u> </u>
	Wesley Chapel, FL 33543		Wesley	Chapel, FL 33543	
	08/01/2018		L1800001	184204	
	Date of filing/registration in Florida	 4.		Document number	
. (a)	Salem Sambuceti, Sebastian				
. (a)	Registered Agent and Registered Office shown on the records of 5020 Millpond Rd	f the Florid	la Dept, of State	- e:	
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	<u>S)</u>	_	
	Unit 3170			_	~
	Wesley Chapel	33543	}		
	Martinez Law, P.A.			_	
(b)	Enter name of NEW Registered Agent and/or NEW Registere	d Office a	ddress:	_	
	mad of state	o me		- 4: 34	7
	2818 Cypress Ridge Blvd.			.I 	•
	NEW Registered Office Address:			4.	
	Suite 230			_	
	Wesley Chapel	L 33544	<b>,</b>		
	imited liability company is not organized under the la	ws of th	e State of Flo		
igent v	ange or changes are made, the Florida street address on will be identical. Or, in the case of a Florida limited lear authorized by an affirmative vote of the members icles of organization or the operating agreement of the	iability of the lin	company, it i mited liabilit	is hereby confirmed that the ch ty company or as otherwise pro	ange(s)
(17	VIALA WIDIAAA		-	inez Weiner	
Signa	ture of a member or authorized representative of a member	_		Printed or typed name of signee	
I here provisi he obi o mer notifie	by accept the appointment as registered agent and ag ions of all statutes relative to the proper and complet ligations of my position as registered agent as provid ely reflect a change in the registered office address, l d in writing of this change.	gree to ac e perforn ed for in I hereby c	ct in this cap nance of my Chapter 602 confirm that	oacity. I further agree to comp duties, and I am familiar with 5, F.S. Or, if this document is the limited liability company i	ly with the and accept being filed has been
$\bigcup_{i=1}^{n}$	Why Menrey				
aignatu	ire of Registered Agent				