118000193115

(Requestor's Name)				
(Address)				
(Address)				
(Cit	y/State/Zip/Phone	> #)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				





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09/20/18--01021--020 ★\$25.00



COVER LETTER

TO: Registration Section

INHS18 (2/14)

Divi	sion of Corporations				
SUBJECT:	VERO BEACH INVESTMENT GROUP LLC				
	Name of Limited Liability Company				
Dear Sir or N	√adam:				
The enclosed	d Registered Agent/Registered Offi	ce Change a	nd fee(s) are submitted for filing.		
Please return	all correspondence concerning thi	s matter to th	ne following:		
Jeffery B.	Wampler				
<u></u>	Name of Person				
	Firm/Company				
411 W. Ur	niversity Avenue				
	Address				
Champaig	n, IL 61820				
	City/State and Zip Code				
E-mail	address: (to be used for future annu	ual report no	rtification)		
For further in	nformation concerning this matter.	please call:			
Jeffery Wa	ampler	at (351-4040		
	Name of Person		Area Code & Daytime Telephone Number		
Regi Divi Clift 2661	REET/COURIER ADDRESS: istration Section sion of Corporations on Building Executive Center Circle ahassee. Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enc	losed is a check for the following	amount:			
2 \$2	25 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.

I. Na	ume of the limited liability company: Vero Beach I	Investment	Group LLC	
2. (a)	411 W. University Avenue	(b) 411 W. University Avenue		
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(*)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Champaign, IL 61820	<u>C</u>	hampaign, IL 61820	
	August 13, 2018		8000193115	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	Jeffery B Wampler			
z. (4)	Registered Agent and Registered Office shown on the records of 411 W. University Avenue Registered Office Address (MUST BE FLORIDA STREET)		ot, of State:	
	Registered Office Address (STOST BE FLORIDA STREET	<u>AUDKESS)</u>	- 1	
	Champaign , FI	61820	SEP 2	
(b)	Bruce Barkett, Esquire		SEP 20 PM 12: 58	
` '	Enter name of NEW Registered Agent and/or NEW Registered	l Office addres	12. 5 12. 5	
	756 Beachland Boulevard		5.59	
	NEW Registered Office Address:			
	Vero Beach	32963		
the cha agent v was/wa	imited liability company is not organized under the la inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members of icles of organization of the operating agreement of the	f the registers lability comp of the limited climited liabi	ed office and the business office of the registered any, it is hereby confirmed that the change(s) I liability company or as otherwise provided in	
Signa	ture of member of authorized representative of a member	 :	Printed or typed name of signee	
provisi the obl to mère notifiè	by accept the appointment as registered agent and agens of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address. It is writing of this change.	r performanc	e of my duties, and I am familiar with and accept	
Signatu	re of Registered Agent			