L18000195875

(Requestor's Name)				
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COVER LETTER

	gistration Section vision of Corporations		
SUBJECT			
		Name of Limited I	Liability Company
Dear Sir or	Madam:		
The enclose	ed Registered Agent/Registered	Office Change and	I fee(s) are submitted for filing.
Please retur	rn all correspondence concerning	g this matter to the	following:
J. Todd Tim	merman		
	Name of Person		_
Shumaker, L	loop & Kendrick, LLP		
	Firm/Company		<u> </u>
101 E. Kenn	edy Blvd, Suite 2800		
	Address	•••	
Tampa, FL 3	33602		
	City/State and Zip Cod	le	_
ttimmerman(@shumaker.com		
E-mai	l address: (to be used for future	annual report notif	ication)
For further	information concerning this mat	ter, please call:	
Lori Dyer		813 at (221-7426
	Name of Person	" (Area Code & Daytime Telephone Number
Reg Div P.O	iling Address: gistration Section rision of Corporations D. Box 6327 lahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enc	closed is a check for the follow	ing amount:	
s	25 Filing Fee	□ \$.	55 Filing Fee & Certified Copy
INHS18 (2/14	4)		

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.

Nε	ame of the limited liability company:	nagement LI	LC
(a)	16090 Flight Path Drive, Brooksville, FL 34604	(b)	
(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	8/15/2018		18000195875
	Date of filing/registration in Florida	4.	Document number
(a)	Registered Agent and Registered Office shown on the records of Chestnur Business Services LLC	f the Florida L	Dept. of State:
	Registered Office Address (MUST BE FLORIDA STREET	'ADDRESS)	
	911 Chestnut St		
	Clearwater	l	
(b)	J. Todd Timmerman Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office add	ress:
	Shumaker, Loop & Kendrick, LLP		
	NEW Registered Office Address:		the state of the s
	101 E. Kennedy Blvd, Suite 2800		
	Tampa	1, ³³⁶⁰²	
ange ent as/w e art Signi here ovis e ob	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited latere authorized by an affirmative vote of the members icles of organization or the operating agreement of the ature of a picinter or authorized representative of a member why accept the appointment as registered agent and as ions of all statutes relative to the proper and completely accept the appointment as registered agent as providing the proper and completely reflect a change in the registered office address, in the writing of this change.	e registered iability con of the limit e limited lia Mary	I office and the business office of the registered npany, it is hereby confirmed that the change(s) ted liability company or as otherwise provided in ability company. Alice Betts Printed or typed name of signee