## 18000283183

(Reque	estor's Name)	)
(Addre	ess)	
(Addre	ss)	
(City/S	tate/Zip/Phor	ne #)
PICK-UP	MAIT	MAIL
(Busin	ess Entity Na	me)
(Docur	ment Number	)
Certified Copies		
Setulied Copies	Certificate	s or status
Special Instructions to Fili	ng Officer:	

Office Use Only



100337465291

12/04/19--U1.14--UU4 \*\*25.db

19 DEC -4 AM 8: 24

STURE LAWY OF STATE STORY OF STATE

RA Change

JAN 1 1 2020

O CUSHING

## COVER LETTER

Division of Corporations	
35MM Stars LLC SUBJECT:	•
	Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Ch	nange and fee(s) are submitted for filing.
Please return all correspondence concerning this mat	ter to the following:
Louis L. Hamby III, Esq.	
Name of Person	
Alley, Maass, Rogers & Lindsay, P.A.	
Firm/Company	
340 Royal Poinciana Way, Suite 321	
Address	
Palm Beach, FL 33480	
City/State and Zip Code	<del></del>
lhamby@amrl.com	
E-mail address: (to be used for future annual re	port notification)
For further information concerning this matter, please	e call:
Louis L. Hamby III, Esq.	561 659-1770
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 amou	int:
■ \$25 Filing Fee	S55 Filing Fee & Certified Copy

STUKE JARY OF STATE STOKE JARY OF CORFORATION 19 DEC -4 AM 8: 24

## 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)		(b)_			
. /	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	6586 Hypoluxo Road #168	6	586 Hypoluxo Road #168		
	Lake Worth, Florida 33467		ake Worth, Florida 33467		
	12/10/2018	LI	8000283183		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	United States Corporation Agents, Inc.				
J. (a)	Registered Agent and Registered Office shown on the records of	the Florida Do	rpt. of State:		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)			
	5575 S. Semoran Blvd. , Suite 36				
	Orlando Fl	32822			
(b)	Louis L. Hamby III, Esq.			19	13 mg
(5)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office addre	<u>ss</u> :	- 330	- 왕왕 - 왕왕-
				i AH	800 177 1977
	NEW Registered Office Address:			∞ ⊒•	S
	340 Royal Poinciana Way, Suite 321			։ շև	ATE
	Palm Beach FI	33480		r.	STATE ORATIONS
change agent v was/we the arti	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lighter authorized by an affirmative vote of the members of icles of organization or the operating agreement of the ture of a member or authorized representative of a member	registered of ability composition of the limite limited liab	office and the business office of the pany, it is hereby confirmed that the diability company or as otherwis allity company.	e registe e chang e provid	ered e(s) led in

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

Signature of Registered Agent