

L190000009914

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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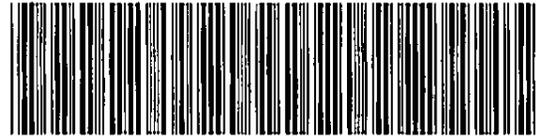
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APR 22 2019

T SCHROEDER

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Inhabit Acquisitions, LLC  
Name of Limited Liability Company

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:

Timothy J. Carey  
Name of Person

Inhabit Acquisitions, LLC  
Firm/Company

2200 Butts Road, Suite 300  
Address

BOCA RATON, FL 33431  
City/State and Zip Code

tcarey227@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jim Carey at ( 630 ) 641 9975  
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

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

\$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.

1. Name of the limited liability company: INHABIT ACQUISITIONS, LLC

2. (a) 2200 Butts Rd, Suite 300 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (b) 2200 Butts Rd, Suite 300 Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)

Boca Raton, FL 33431 Boca Raton, FL 33431

3. 01/08/19 Date of filing/registration in Florida 4. L19000009914 Document number

5. (a) RIVERA, NESTOR Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

2200 Butts Road, Suite 300 Registered Office Address (MUST BE FLORIDA STREET ADDRESS) Boca Raton, FL 33431

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(b) LAUREN CAREY Enter name of NEW Registered Agent and/or NEW Registered Office address:

<SAME ADDRESS> NEW Registered Office Address: FL

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member Timothy J. Carey Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent