L190000 10332

(Requestor's Name)					
(Address)					
(Address)					
ty/State/Zip/Phone	e #)				
WAIT	MAIL				
(Business Entity Name)					
(Document Number)					
_ Certificates	s of Status				
Special Instructions to Filing Officer:					
	dress) dress) WAIT siness Entity Nar cument Number)				

Office Use Only



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COVER LETTER

INHS18 (2/14)

	gistration Section vision of Corporations		•	
SUBJECT	CALOOSA WATERFRONT, LLC	;		
		Limited Lia	bility Company	
Dear Sir or	Madam:			
The enclos	ed Registered Agent/Registered Office C	hange and fe	ee(s) are submitted for filing.	
Please retu	rn all correspondence concerning this ma	tter to the fo	ollowing:	
Michael (Green			
•	Name of Person		_	
CALOOS	SA WATERFRONT, LLC			
	Firm/Company		-	
14801 Pa	alm Beach Blvd, Suite 100			
	Address		- SEC	6107
Ft Myers	FL 33905		を を を を を を を を を を を を を を	רבט 2
	City/State and Zip Code			_
mmgreer	n@mmgreen.com			AT TO
E-ma	ail address: (to be used for future annual r	eport notific	ration)	2n :
For further	information concerning this matter, plea	se call:		
Michael (Green at	541	267-3780	
	Name of Person		Area Code & Daytime Telephone Numbe	r
Re Di Cli 26	rREET/COURIER ADDRESS: egistration Section vision of Corporations ifton Building 61 Executive Center Circle illahassee, Florida 32301	Regi Divi P.O.	ILING ADDRESS: istration Section sion of Corporations Box 6327 ahassee, Florida 32314	
En	nclosed is a check for the following amo	unt:		
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 comp submits the following statement in order to change its registered office or registered agent, or both, in the State Florida.

Name of the limited liability company: CALOOS	A WATERFRONT, L	LC
a) 14801 Palm Beach Blvd, Suite 100	(b) 14801 F	Palm Beach Blvd, Suite 100
Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
Ft Myers FL 33905	Ft Myers	s FL 33905
1/08/2019	L190000	10332
Date of filing/registration in Florida	4.	Document number
(a) Billie Williams		
(a) Registered Agent and Registered Office shown on the recor	ds of the Florida Dept. of Stat	- c :
14801 Palm Beach Blvd, Suite 100		
Registered Office Address (MUST BE FLORIDA STR.	EET ADDRESS)	_
Ft Myers	, FL 33905	2019 F SEGR FALL /
Billie Wilson		FILE 27
Enter name of NEW Registered Agent and/or NEW Regis	tered Office address:	
14801 Palm Beach Blvd, Suite 100		AM IO: 0
NEW Registered Office Address:		- 02
Ft Myers	, FL 33905	-
	_, FL	-
the limited liability company is not organized under the change or changes are made, the Florida street address to the will be identical. Or, in the case of a Florida limitely were authorized by an affirmative vote of the membarticles of organization or the operating agreement of the second or the operating agreement	ss of the registered offic ed liability company, it i ers of the limited liabilit	e and the business office of the register is hereby confirmed that the change(s) by company or as otherwise provided in inpany.
gnature of a member or authorized representative of a member		Printed or typed name of signee
ereby accept the appointment as registered agent and visions of all statutes relative to the proper and compobligations of my position as registered agent as properly reflect a change in the registered office addressified in writing of this change.	plete performance of my	duties, and I am familiar with and acce
nature of Registered Agent	_	