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(Requestor's Name)					
(Address)					
(Address)					
(City/	State/Zip/Pho	ne #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificate	es of Status			
Special Instructions to Filing Officer:					





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SEP 2019

## **COVER LETTER**

TO:

TO:	Registration Section Division of Corporations				
CHR I	PA-57, LLC				
JUBJ	Name of Limited Liability Company				
Dear S	Sir or Madam:				
The er	nclosed Registered Agent/Registered Off	ice Change and	fee(s) are submitted for filing.		
Please	return all correspondence concerning th	is matter to the f	following:		
Patsy	y M Albert				
	Name of Person	<del>-</del>	<del>_</del>		
	Firm/Company		_		
2102	5 Lake Vienna Drive				
	Address	-	_		
Land	O' Lakes, FL 34638				
	City/State and Zip Code				
palbe	ert1@att.net				
	E-mail address: (to be used for future ann	ual report notifi	cation)		
For fu	orther information concerning this matter,	please call:			
Patsy	y M Albert	951	265-6884		
	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	Reş Div P.C	gistration Section rision of Corporations D. Box 6327 lahassee, Florida 32314		
	Enclosed is a check for the following				
	\$25 Filing Fee	□ \$5	5 Filing Fee & Certified Copy		
INHS	18 (2/14)				

## 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

l. Na	me of the limited liability company:	PA-	57, LLC	<u> </u>
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)
	10858 Barbados Isle Drive		10858 E	Barbados Isle Drive
	Tampa, FL 33647	<del> </del>	Tampa,	FL 33647
	2/19/19			L19000044587
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	Patsy M Albert			
J. (a)	Registered Agent and Registered Office shown on the records	of the Florida	Dept. of Star	ic:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			_
	10858 Barbados Isle Drive	<del>_</del>		_
	Tampa	<sub>FL</sub> 33647		
	,	. L	_	- 2813
(b)				_
	Enter name of NEW Registered Agent and/or NEW Register	red Office add	ress:	
				نب
	NEW Registered Office Address:			- 10:1.5
	21025 Lake Vienna Drive			Ö:
	Tiozo Lako Tiolina Birro			_ · · · · · · · · · · · · · · · · · · ·
	Land O' Lakes	FL 34638		
the cha agent v was/we the arti	imited liability company is not organized under the inge or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the member icles of organization or the operating agreement of the operating agreement of the operation of a member of a	of the regis Hiability co is of the lim he limited l	tered offic mpany, it ited liabili ability con	re and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany.  Patsy M Albert  Printed or typed name of signee
provisi the obl to merc notified	by accept the appointment as registered agent and coms of all statutes relative to the proper and completions of my position as registered agent as proviety reflect a change in the registered office address, d in writing of this change.	agree 10 act ete perform ided for in C I hereby co	in inis cap ince of my Shapter 60 infirm that	pactive 1 juriner agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been