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COVER LETTER

TO:

TO: Registration Section Division of Corporations				
PA-239, LLC				
Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Off	ice Change and fee(s) are submitted for filing.			
Please return all correspondence concerning the	is matter to the following:			
Patsy M Albert				
Name of Person				
[2' /C'				
Firm/Company 21025 Lake Vienna Drive				
Address				
Land O' Lakes, FL 34638				
City/State and Zip Code				
palbert1@att.net				
E-mail address: (to be used for future ann	nual report notification)			
For further information concerning this matter,	, please call:			
Patsy 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	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check for the following	g amount:			
\$25 Filing Fee	□ \$55 Filing Fee & Certified Copy			
INHS18 (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.

1. N	ame of the limited liability company:	PA- 	239, LLC ———————————————————————————————————
2. (a)		(b)	
, ,	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	γ:	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	10858 Barbados Isle Drive		10858 Barbados Isle Drive
	Tampa, FL 33647		Tampa, FL 33647
	2/19/19		L19000048512
3.	Date of filing/registration in Florida		Document number
5. (a)	Patsy M Albert		
J. (u)	Registered Agent and Registered Office shown on the recor	rds of the Florida	Dept. of State:
	Registered Office Address (MUST BE FLORIDA STR.	EET ADDRESS	
	10858 Barbados Isle Drive		
	Tampa	, FL_33647	<u></u>
		<u>.</u> , -	- i
(b)			
	Enter name of NEW Registered Agent and/or NEW Regis	stered Office add	lress:
	NEW Registered Office Address:	· ·	<u> </u>
	21025 Lake Vienna Drive		č
			
	Land O' Lakes	_{FI} 34638	
Signal I here provise the obto men	will be identical. Or, in the case of a Florida limit ere authorized by an affirmative vote of the membicles of organization or the operating agreement of a member or authorized representative of a member or by accept the appointment as registered agent and	ess of the registed liability copers of the limited l	tered office and the business office of the registered mpany, it is hereby confirmed that the change(s) ited liability company or as otherwise provided in