L19000080839

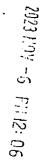
(Requestor's Name)						
(Address)						
(4)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

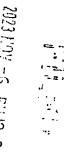




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	COVER	COVER LETTER			
TO: Registration Section Division of Corporations	•				
SUBJECT: CFS ASC Holdings, LLC					
i	Name of Limited	Liability Company			
Dear Sir or Madam:					
The enclosed Registered Agent/Registered	Office Change ar	nd fee(s) are submitted for filing.			
Please return all correspondence concerning	g this matter to th	e following:			
Stephanie Papoulis					
Name of Person					
CFS Management, LLC					
Firm/Company					
8043 Cooper Creek Blvd, Suite 101					
Address	.				
University Park, FL 34201					
City/State and Zip Coo	de				
stephanie.papoulis@useye.com					
E-mail address: (to be used for future	annual report not	tification)			
For further information concerning this mat	tter, please call:				
Stephanie Papoulis	941 at (373-6277			
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 follow	ving 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.

۱,	Na	me of the limited liability company: CFS ASC Holdings	s, LL	C		
2	(a)	8043 Cooper Creek Blvd		(b)	8043 Coc	pper Creek Blvd
	(α)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Suite 101			Suite 101	
		University Park, FL 34201	_		University	y Park, FL 34201
		03/27/2019		ı	.19000080	839
3.		Date of filing/registration in Florida	4.	_		Document number
5.	(a)	Sirena Management, LLC				
		Registered Agent and Registered Office shown on the records of the Registered Office Address (MUST BE FLORIDA STREET ADDRESS			æpt, of Stat	- · · · · · · · · · · · · · · · · · · ·
		2601 S. Tamiami Trail				
		Sarasota, FL_	34239)		2023 LOV
	(b)					5 1
Enter name of NEW Registered Agent and/or NEW Registered Office addre						C) "
		CFS Management, LLC				- Fig.
		NEW Registered Office Address:				12:
		8043 Cooper Creek Blvd, Suite 101				_
		University Park, FL	34201			_
ch ag wa the	ange ent y as/ve and Signat	mited liability company is not organized under the laws or changes are made, the Florida street address of the notification of the respective properties of a Florida limited liability and affirmative yote of the members of these of preganization of the operating agreement of the limited framework and agreement of the limited and agreement of the appointment as registered agent and agree of a street agent and agree of the appointment as registered agent and agree of the appointment as registered agent and agree of the appointment as registered agent and agree of the street agent agent and agree of the street agent agent and agree of the street agent age	egisto pility the I mite S	erec con imit d lia teph	l office an ipany, it i ed liabilit ibility con anic Papou	d the business office of the registered s hereby confirmed that the change(s) by company or as otherwise provided in an apany. Printed or typed name of signee
<i>no</i>		ons of all statutes relative to the proper and complete prignitions of my position as registered agent as provided by reflect a change of the registered office address. I he fin writing of this change. The office decrease the change of the change of the change.	erfor for in reby	mar a Cl cor	ice of my napter 602 ifirm that	duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been