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COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Sun and Seas FL Rentals LLA Name of Limited Liability Company	<u></u>			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Change and fec(s) are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Elda Arias Name of Person				
Sun and Seas FL Rentals LLC Firm/Company				
5880 S.W 32 terroce				
fort lauderdale FL 33312				
City/State and Zip Code Sunand Seas rentals @ Gmail. Com E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Elda Arias , 954, 444-25	594			
Name of Person Area Code & Daytime Telep	phone 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				
Epclosed is a check for the following amount:				
1 \$25 Filing Fee	y			

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. Na	Name of the limited liability company: SUN and Seas FL rentals	
2. (a)	500051)27 toron	N 32 terra
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BO	
	Fort landordale Fl. Got landordale	Δ
	32217 FI 22312-	
		
	10/17/2019 19000260959	
3.	Date of filing/registration in Florida 4. Document number	.1
5. (a)	(a) Legal Zoom/United States Corporation agen	Uts INC.
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	
	55 15 S. SCIPDON DIVO 30 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
	Registered Villee Address (MOST BETEVALUASTREET ADDRESS)	
	CYCCOAND 22822	
	FI. <u>52062</u>	
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address: 5880 Std 32 textage	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:	<u> </u>
	5880 SW 32 terrace 2 ≥ 5	
	NEW Registered Office Address:	
	NEW Registered Office Address: Fort lauderdale 3	U
	77217	
	,FL_ <u>J.221.4</u>	
If the li	the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that change or changes are made, the Florida street address of the registered office and the business office of the re	after
agent w	nt will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change were authorized by an affirmative vote of the members of the limited liability company or as otherwise provides	ge(s)
	articles of organization or the operating agreement of the limited liability company.	acu iii
Signati	gnature of a member or authorized representative of a member Printed or typed name of signee	
I heret	ereby accept the appointment as registered agent and garee to act in this canacity. I further garee to comply	with the
provisio the obli	visions of all statutes relative to the proper and complete performance of my duties, and I am familiar with an obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is bei perely reflect a change in the registered office address, I hereby confirm that the limited liability company has	d accept ng filed
notifiea	terety reflect a change in the registered office duaress, I hereby confirm that the limited idibility company has fied in writing of this change.	OCEN
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Signature of Registered Agent