## 120000318346

(Requestor's Name)					
(Address)					
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## **COVER LETTER**

_	istration Section ision of Corporations								
SUBJECT:	SOUTHERN INVESTMENT GROUP	P LLC							
ocomer.	Name of Limited Liability Company								
Dear Sir or l	Madam:								
The enclose	d Registered Agent/Registered Of	Tice Change	and fee(s) are submitted for filing.						
Please return	n all correspondence concerning the	his matter to	the following:						
Kevin Prouty									
	Name of Person								
The Real Acc	counting Co.								
	Firm/Company								
10122 Pointv	riew Court								
	Address								
Orlando, FL 3	32836								
	City/State and Zip Code		<del></del>						
	alaccountingco.com								
E-mail	address: (to be used for future an	nual report n	otification)						
For further i	nformation concerning this matter	, please call:							
Kevin Prouty		at (	790-3424						
	Name of Person		Area Code & Daytime Telephone Number						
Reg Divi	REET/COURIER ADDRESS: istration Section ision of Corporations ton Building		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327						
266	1 Executive Center Circle ahassee, Florida 32301		Tallahassee, Florida 32314						
Enclosed is a check for the following amount:									
<b>⊘</b> \$:	25 Filing Fee	ت	\$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.

1.	Na	nme of the limited liability company:	STME	NT GROUP	LLC	
2	(a)	2281 LEE RD	,	(b) 2281 LEE RD		
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	<del></del>		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		202		202		
		WINTER PARK, FL 32789	_	WINTE	R PARK, FL 32789	
		12 <i>l</i> 03 <i>l</i> 2020		L200003	78346	
3.		Date of filing/registration in Florida	4.		Document number	
5.	(a)	DIMITROVA, DENITSA				
	()	Registered Agent and Registered Office shown on the records of t	the Flori	da Dept. of S	State:	
		2281 LEE RD			٦	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				- 1741 F	
		202				
		WINTER PARK32789 FL 32789			TALLARS SEE STATE	
	(b)	REGISTERED AGENTS INC				
	` ,	Enter name of NEW Registered Agent and/or NEW Registered	Office a	ddress:		
		7901 4TH ST N			<del>"</del> 2	
		NEW Registered Office Address:			<del></del>	
		STE 300			<u> </u>	
		ST. PETERSBURG, FL.	33702	7 <del>2</del>		
the ag wa	e cha ent v is/we	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the regability of the limited	gistered of company, mited liab I liability o	fice and the business office of the registered it is hereby confirmed that the change(s) ility company or as otherwise provided in company.	
Signature of a member or authorized representative of a member				NITSA DIN	Printed or typed name of signee	
	-	by accept the appointment as registered agent and agr	oo to a	et in this :		
pro the to	ovisi 2 obl merc	ny accept the appointment as registered agent and agr ions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address, I h of in writing of this change.	perfor d for m	mance of i Chapter (	ny duties, and Lam familiar with and accept 605 F.S. Or. if this document is being filed	
avid		David Roberts - Assistant Se	ecretary	1		

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent