L22000016715

_____
(Requestor's Name)

_____
(Address)

_____
(Address)

_____
(City/State/Zip/Phone #)

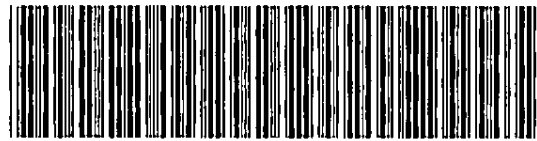☐ PICK-UP   ☐ WAIT   ☐ MAIL

_____
(Business Entity Name)

_____
(Document Number)

Certified Copies _____   Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

COVER LETTER

TO: Registration Section
        Division of Corporations

SUBJECT: OCEAN PROPERTY MANAGEMENT GROUP, LLC.
_____
                    Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

EVIAN RODRIGUEZ
_____
                    Name of Person

OCEAN PROPERTY MANAGEMENT GROUP, LLC.
_____
                    Firm/Company

2525 SW 27 AVE   SUITE 101
_____
                    Address

MIAMI FL 33133
_____
                City/State and Zip Code

EVIAN@OCEANMGMT.NET
_____
    E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

EVIAN RODRIGUEZ   305   496 - 2938
_____ at (_____) _____
        Name of Person   Area Code & Daytime Telephone Number

Mailing Address: **Street Address:**
Registration Section   Registration Section
Division of Corporations   Division of Corporations
P.O. Box 6327   The Centre of Tallahassee
Tallahassee, FL 32314   2415 N. Monroe Street, Suite 810
                                        Tallahassee, FL 32303

Enclosed is a check for the following 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. Name of the limited liability company: OCEAN PROPERTY MANAGEMENT GROUP, LLC.

2. (a) 2525 SW 27 AVE SUITE 101 MIAMI, FL 33133

Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

(b) 2525 SW 27 AVE SUITE 101 MIAMI, FL 33133

Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

3. 01/31/2019

Date of filing/registration in Florida

4. L22000016715

Document number

5. (a) _____

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
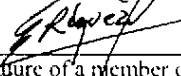
EVIAN RODRIGUEZ

Registered Office Address   *(MUST BE FLORIDA STREET ADDRESS)*

1175 NE 125TH ST STE 618

NORTH MIAMI , FL 33161

(b) _____

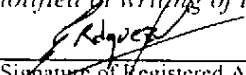Enter name of **NEW Registered Agent** and/or **NEW Registered Office address:**

EVIAN RODRIGUEZ

NEW Registered Office Address:

2525 SW 27 AVE SUITE 101

MIAMI , FL 33133

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

EVIAN RODRIGUEZ

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314