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| Certified Copies Certificates of Status | | | |
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| Special Instructions to Filing Officer: | | | |
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Office Use Only



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COVER LETTER

| TO: Registration Section Division of Corporations | | | | |
|--|---|--|--|--|
| Perigee Group LLC SUBJECT: | | | | |
| | e of Limited Liability Company | | | |
| Dear Sir or Madam: | | | | |
| The enclosed Registered Agent/Registered Office | ce Change and fee(s) are submitted for filing. | | | |
| Please return all correspondence concerning thi | s matter to the following: | | | |
| Angela Myeress | | | | |
| · Name of Person | | | | |
| Perigee Group | | | | |
| Firm/Company | | | | |
| 1605 Main St. Suite 709 | | | | |
| Address | <u> </u> | | | |
| Sarasota FL 34236 | | | | |
| City/State and Zip Code | | | | |
| amyeress@perigeegroup.com | | | | |
| E-mail address: (to be used for future annual | ual report notification) | | | |
| For further information concerning this matter, | please call: | | | |
| Angela Myeress | 941 312-1697 | | | |
| 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 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. Na | me of the limited liability company: Perigee Grou | ıp LLC | | | |
|--|---|---|--|--|--|
| 2. (a) | 1605 Main St. | (b) 1605 M | (b) 1605 Main St. | | |
| - . (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 BON) | | |
| | Suite 709 | Suite 70 | 09 | | |
| | Sarasota FL 34236 | Sarasot | a FL 34236 | | |
| | January 21, 2003 | M030000 | 000207 | | |
| 3 | Date of filing/registration in Florida | | Document number | | |
| e (å) | CT CORPORATION SYSTEM | | | | |
| 5. (a) | Registered Agent and Registered Office shown on the records of | the Florida Dept. of Sta | te: | | |
| | Registered Office Address (MUST BE FLORIDA STREET | ADDRESS) | - | | |
| | 1200 SOUTH PINE ISLAND ROAD | | ₩ 6 | | |
| | PLANTATION,, FI | 33324 | PR 23 PH 12: 25 | | |
| (b) | Angela Myeress | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | |
| (0) | Enter name of NEW Registered Agent and/or NEW Registered | d Office address: | | | |
| | 1605 Main St. | | 25 | | |
| | NEW Registered Office Address: | | _ | | |
| | Suite 709 | | _ | | |
| | Sarasota | 34236 | | | |
| the cha agent v was/we the arti | imited liability company is not organized under the launge or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited I ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the ture of a member or authorized representative of a member by accept the appointment as registered agent and agree of all statutes relative to the proper and complete | f the registered officiability company, it of the limited liability coloring limited liability coloring George L St | ree and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany. Tobel, II Printed or typed name of signce | | |
| | by accept the appointment as registered agent and agons of all statutes relative to the proper and complete igations of my position as registered agent as provide ly reflect a charge in the registered office address, I d'infuriting of this change | ed for in Chapter 60 hereby confirm that | 5, F.S. Or, if this document is being filed the limited liability company has been | | |

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

INHS18 (2/14)