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EXAMINER



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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Eko Landmark A. Name of Limit	Capisitions LLC ted Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Offic	e Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
Maya Daniels Name of Person		
Landmart Responsaly		
3505 E Frontage Rd #150	<u>O</u>	
Tampa FL 33(00) City/State and Zip Code		
E-mail address: (to be used for future annual report notification)	nhal, com	
For further information concerning this matter, p	lease call:	
Maya Daniels at a	(813) 08 3907 Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the following 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 608.416 or 608.508, 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: Explore	dmark acquisitions LLC	
2. (a) Principal office address of limited liability company	y:	
(Note: MUST BE STREET ADDRESS)	505 Parkway #4 Jupiter = 2 33447	
(b) Mailing address of limited liability company:		
(Note: MAY BE POST OFFICE BOX)	3500 E Frontage Rd *150 Tampa FC 33607	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:	
Registered Agent:	CT Coppration	
Registered Office Address:	1200 Sphelbland Rd	
	Plantation FL 33324	
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:		
NEW Registered Agent:	Elco Landmark Kesidental Managment LCC	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	3505 & Frontage Rd #150 Tampa, FL 33607	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be identiability company, it is hereby confirmed that the change(s of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Printed or typed name of signee I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my por Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability companion of the companion by the companion of the companion of the limited liability companion.	clorida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote rwise provided in the articles of organization	
Signature of Registered Agent		

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