## <u>\_\_\_\_\_</u>

MI200001551

(Re	questor's Name)				
(Ad	dress)				
(Ad	dress)				
(City/State/Zip/Phone #)					
PICK-UP		MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates	of Status			
Special Instructions to Filing Officer:					
	Office Use On	ly			



05/10/17--01040--010 \*\*25.00



MAY 1 1 2017 Y SULKER



CORPORATION SERVICE COMPANY'

CSC - WILMINGTON Suite 400 2711 Centerville Road Wilmington De 19808 800-927-9800 302-636-5454 FAX

TO: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ashley Jiminez ashley.jiminez@cscglobal.com

Date: May 8, 2017

Order#: 629244-007

Re: DUAL COMMERCIAL LLC

Enclosed please find:

<u>XX</u> Change of Registered Agent and Office. XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.
XX Issue Proof of Filing.
XX Please return evidence to the following:

Attn: Ashley Jiminez c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

XX \_\_\_\_ Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

## 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: DUAL COMMER	CIAL LI	LC	
2. (	(a)	1100 5TH AVENUE SOUTH Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (b	) 1100 5TH AVENUE SOUTH Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		SUITE 301	_	SUITE 301	
		NAPLES FL 34102	-	NAPLES, FL, 34102	
		03/19/2012	-	M12000001551	
3.		Date of filing/registration in Florida	4.	Document number	
5.	(a)	CT CORPORATION SYSTEM			
	(4)	Registered Agent and Registered Office shown on the records of th	e Florida	Dept. of State:	
		1200 SOUTH PINE ISLAND ROAD			
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		······································	
				2	
		PLANTATION , FL	33324	<u>ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا </u>	
(b)	Corporation Service Company				
		Enter name of NEW Registered Agent and/or NEW Registered C	)ffice add	dress:	
		1201 Hays Street			
		NEW Registered Office Address:			
					•
					•
		Tallahassee, FL	32301		
1641	1!	mited lightlity company is not organized under the low	faba	Casto of Florido, it is boucher our formed that offer	

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 porganization or the operating agreement of the limited liability company.

Que Jill Cilmi, Authorized Person 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 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.

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Signature of Registered Agent Corporation Service Company BY: Grace E. Kirby, Asst. Vice President

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