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COVER LETTER

	istration Section ision of Corporations				
SUBJECT:	Siripai LLC				
	Name of Limited Liability Company				
Dear Sir or i	Madam:				
The enclose	d Registered Agent/Register	ed Office Change and f	ec(s) are submitted for filing.		
Please return	n all correspondence concer	ning this matter to the fi	ollowing:		
Andrew Levy	,				
	Name of Person	1			
Frank, Weint	perg & Black, P.L.				
	Firm/Company		_		
1875 NW Co	rporate Blvd., Suite 100				
	Address		_		
Boca Raton,	FL 33431				
	City/State and Zip (Code	_		
noreenhassan	2@aol.com				
E-mail	address: (to be used for futi	are annual report notific	eation)		
For further i	nformation concerning this	matter, please call:			
Andrew Levy	,	561 at (989-0700		
	Name of Person		Area Code & Daytime Telephone Number		
Reg Div P.O	iling Address: istration Section ision of Corporations . Box 6327 ahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
Enc	losed is a check for the foll	owing amount:			
⊜ \$:	25 Filing Fee	□ \$55	5 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.

Na	ame of the limited liability company:			
(a)	6010 Le Lac Rd.		(b)	b)
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(~)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Boca Raton, FL 33496	_	,	Boca Raton, FL 33496
	06-16-2011		N	M13000006247
	Date of filing/registration in Florida	4.		Document number
(a)	Daniel Hassan			
	Registered Office Address (MUST BE FLORIDA STREET AL	DDRES	<u>(S)</u>	<u>5)</u>
		3487		2021 AUG SECSE () TALLA!
(b)	Enter name of NEW Registered Agent and/or NEW Registered O			Idress:
	NEW Registered Office Address:			
	6010 Le Lac Road			
	Boca Raton , FL 3	3496		
nge nt we artic gnati	mited liability company is not organized under the laws or changes are made, the Florida street address of the revill be identical. Or, in the case of a Florida limited liability reauthorized by an affirmative vote of the members of cles of organization or the operating agreement of the linguistic of a member or authorized representative of a member	egister ility c the lir mited	om nite Jial	ed office and the business office of the registered empany, it is hereby confirmed that the change(s) sited liability company or as otherwise provided in iability company, OREEN HASSAN Printed or typed name of signee
ereb vişid obli nere fied	ny accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete per gations of my position as registered agent as provided fly reflect a change in the registered office address, I her in writing of this change.	to ac erform or in reby c	t in Che Onj	in this capacity. I further agree to comply with the ince of my duties, and I am familiar with and acce Thapter 605, F.S. Or, if this document is being filed infirm that the limited liability company has been

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Signature of Registered Agent