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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC REGISTERED AGENT CHANGE CAPITAL RESORTS MANAGEMENT, LLC

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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: Capital Re	esor	ts <u>Man</u>	agement, LLC		
2.	(a)	2685 Ulmerton Rd		_(b) 9654 N. Kings Hwy			
	(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
		Suite 101	Suite		101		
		Clearwater, FL 33762		Myrtle Beach, SC 29572			
		12/12/2013		M13000007853			
3.		Date of filing/registration in Florida	4.		Document number		
5.	(e)	C T CORPORATION SYSTEM					
'ı	(a)	Registered Agent and Registered Office shown on the records of th	e Florid	a Dept_of State	::		
		1200 SOUTH PINE ISLAND ROAD					
		Registered Office Address (MUST BE FLORIDA STREET A.	DDRES	<u>S)</u>			
					_ <u>_</u>		
		PLANTATION	3332	4	. 18		
	(b)	Registered Agents Inc.			007 -3		
	(0)	Enter name of NEW Registered Agent and/or NEW Registered (Office ad	ldress:	- 1		
	3030 N. Rocky Point Dr.						
NEW Registered Office Address:) - -		
	STE 150A						
		Tampa	3360	7			
the age was the	cha nt v s/we arti igua	imited liability company is not organized under the lawinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of seles of organization or the operating agreement of the law to a member of authorized representative of a member of the law accept the appointment as registered agent and agreement of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address. In	the regineration the limited Rile region according to the limited region according to the limi	stered office ompany, it is nited liability liability con ey Park	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in apany. Printed or typed name of signee active. I further agree to comply with the duties, and I am familiar with and accent		
nou	шес У	His vertified a change in the registered office dataress, in this vertified of this change. Bill Havre - Presider to of Registered Agent		опунт тки	те атим насту сотрану на осси		