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AUG 04 2015 S. YOUNG

COVER LETTER

		COVERBEITER	
TO:	Registration Section Division of Corporations		
SUBJ		5+ Marina, LLC of Limited Liability Company	·
Dear	Sir or Madam:		
The e	nclosed Registered Agent/Registered Office	e Change and fee(s) are submitted for filing.	
Please	e return all correspondence concerning this	matter to the following:	
	Dana Bushona Name of Person		
<u>Su</u>	nbelt Land Managem Firm/Company	nent, LLC	15 ALS -3
<u>316</u>	29 Springbank Lane Address		
<u>C</u>	harloHe NC 2822 City/State and Zip Code	26	<i></i>
d	hus hong @ amail - C E-mail address: (to be used-for future annua	al report notification)	
For fu	urther information concerning this matter, p	lease call:	
	Dara Bushona Name of Person	at (704) 295-402 Area Code & Daytime Telepho	
	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 a	mount:	
	\$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. Name of the limited liability company: DUD be 1+4	alm Coast Marina, LLC
2. (a) 5150 Tamiami Trail North Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b) 5150 Tamiami Trail North Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
Suite 403	Suine 403
Maples FL 34103	Dapies, FL 34103
July 21, 2014	M14000005165
3. Date of filing/registration in Florida	4. Document number
5. (a) COrporation Registered Agent and Registered Office shown on the records of the	an Florida Dant of State
. 🗸	Cad
1 200 South Pine Island 19 Registered Office Address (MUST BE FLORIDA STREET A.	
· · · · · · · · · · · · · · · · · · ·	一一一
Plantation	22274
, FL	38387 2 D
(b) William Allen	
Enter name of NEW Registered Agent and/or NEW Registered (Office address:
5150 Tamiami Trail North	
NEW Registered Office Address:	
Juli e 403	
paples , FL	34103
If the limited liability company is not organized under the law the change or changes are made, the Florida street address of agent will be identical. Or, in the case of a Florida limited lia was/were authorized by an affirmative vote of the members of the articles of organization or the operating agreement of the limited liability.	the registered office and the business office of the registered bility company, it is hereby confirmed that the change(s) f the limited liability company or as otherwise provided in 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 agree provisions of all statutes relative to the proper and complete the obligations of my position as registered agent as provided to merely reflect a change in the registered office address, I had notified in writing of this change.	ee to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and accept I for in Chapter 605, F.S. Or, if this document is being filed hereby confirm that the limited liability company has been
will sall	

Signature of Registered Agent