# M14000007808

(Requestor's Name)								
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PICK-UP WAIT MAIL								
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### ORION STATE LICENSING, INC.

May 29, 2017

#### **VIA FED EX**

Florida Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

#### **VIA US MAIL**

Florida Registration Section Division of Corporations

PO Box 6327 Tallahassee, FL 32314

Re:

PLAZA SERVICES OF ATLANTA, LLC Statement of Change of Registered Office or Registered Agent or Both For Limited Liability Company

Dear Sir or Madam:

Enclosed please find:

- 1) Statement of Change of Registered Office or Registered Agent or Both For Limited Liability Company
- 2) Company check made payable to the "Florida Division of Corporations" in the amount of \$25.00

If you have any questions, please contact the undersigned.

Very truly yours, ORION STATE LICENSING, INC.

**Enclosure** 

#### **COVER LETTER**

Division of Corporations	
Plaza Services, LLC SUBJECT:	
	of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this n	natter to the following:
Gerald Lewis	
Name of Person	
SEUSA Management, LLC	
Firm/Company	<del></del>
110 Hammond Drive, Suite 110	
Address	
Atlanta, GA 30328	
City/State and Zip Code	
glewis@plazaserviceslic.com	
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, ple	ease call:
Janet Lopez	888 315-0805 at ()
Name of Person	Area Code & Daytime Telephone Number
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 an	nount:
□ \$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.

i.	Na	me of the limited liability company: Plaza Services	of Atlar	ita, LLC				
2. (	ลโ	110 Hammond Drive, Suite 110, Atlanta, GA 30328	(b) 110 Hammond Dr Suite 110, Atlanta, GA 3				30328	
\	, <del></del> ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0)	Mi	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
			-	<u>, , , , , , , , , , , , , , , , , , , </u>		<del></del>		<u>., </u>
_		10-27-2014		M14000	007808			
3.		Date of filing/registration in Florida	4.	Ľ	Document number	•		
<b>5</b> .	(a)	CT Corporation System						
٠.	(14)	Registered Agent and Registered Office shown on the records of the	he Florida l	Dept. of State:			•	
		1200 South Bine Johnst Book		·				
		1200 South Pine Island Road  Registered Office Address (MUST BE FLORIDA STREET A	DDDECC					
		MUST BE PLUNIDA STREET A	<u>PDĢESSI</u>					
				<del> </del>				
		Plantation Fr.	33324				<u>-</u>	
		) ·					7 ح	;
(b)	b)	inCorp Services, Inc.					F	,
(-)		Enter name of NEW Registered Agent and/or NEW Registered (	Office add	ess:		汤是	9	ابد مشیر اید مشیر
						22	-	Marin di Norg
		17888 67th Court North				<u> </u>	E	2
		NEW Registered Office Address:	***	-		FT 4/2	1	i ji
							2	
			<del></del>	<del></del>		2		
		Loxahatchee , FL	33470					
the ager was	chai it w /we	mited liability company is not organized under the law nge or changes are made, the Florida street address of taill be identical. Or, in the case of a Florida limited lial re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	the regist bility con the limit	ered office a npany, it is b ed liability o	and the business of hereby confirmed company or as other	ffice of	the re	egistered
		AZ	SEUSA	Managemen	it, LLC, Manager by	y Gerald	Lewis	s, Manager
		ure of a member or authorized representative of a member			Printed or typed name			<del></del>
I he provided the control of the con	reb visio obli vere fied	ly accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p gations of my position as registered agent as provided by teflect a chappe in the registered office address, I have the writing of this glange.				se to co niliar w Cument compai	mply with and its being the house the house the house the hours of the house	with the d accept ng filed been
\		c of Registered Agent Kathy Shin or						