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7 2017



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.

(a)	Principal office address of limited liability company:	(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)
	5070PGABLVDSUITE204		5070PGABLVDSUITE204
	PALMBEACHGARDENS,FL33418		PALMBEACHGARDENS,FL33418
	02/11/2015	N	M15000001127
	Date of filing/registration in Florida	4.	Document number
(ถ)	Registered Agent and Registered Office shown on the records	<u></u>	
	Registered Agent and Registered Office shown on the records JONATHANBERSTEINCONSULTINGCORP.	of the Florida l	Dept. of State:
	Registered Office Address <u>(MUST BE FLORIDA STREE</u> 5090PGABLVD,SUITE308	ET ADDRESS)	
	PALM BEACH GARDENS	FL 33418	·
		,	
(b)	Enter name of NEW Registered Agent and/or NEW Register	red Office add	Pess:
	CTCorporationSystem		
	NEW Registered Office Address:		20 6 Fr
	1200SouthPinelslandRoad		
			
	Plantation	FL 33324	72
e cha ent v is/w	Plantation limited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the membericles of organization or the operating agreement of	laws of the softhe softhe regist liability corrs of the limi	State of Florida, it is hereby confirmed that aft tered office and the business office of the regis mpany, it is hereby confirmed that the change (ted liability company or as otherwise provided
* ~	yeur free	Stepl	nanieBoehm,Member
\sim	itule of a member or authorized representative of a member		Printed or typed name of signee
	by accept the appointment as registered agent and		

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

INHS18 (2/14)