	Florida Department of State
	Division of Corporations Electronic Filing Cover Sheet
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	To: Division of Corporations Fax Number : (850)617-6383
	From:
	Account Name : CORPORATE CREATIONS INTERNATIONAL INC Account Number : 110432003053 Phone : (561)694-8107
	Fax Number : (561)694-1639
Enter (ann	the email address for this business entity to be used for fuffire 🗲 Mual report mailings. Enter only one email address please. 🦷 🖉
522	And report mailings. Enter only one email address please.** The general Address report of the second s
r	LLC REGISTERED AGENT CHANGE
	2500 SPRINGDALE LLC
- :2	Certificate of Status 0
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2018 1907 2	Estimated Charge

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page 2

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.

ame of the limited liability company: 2500 Springd	ale LLC	
5118 N. 56TH STREET	(b) 5	118 N. 56TH STREET
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
TAMPA, FL 33610		AMPA, FL 33610
12/10/2015	M1	5000009877
Date of filing/registration in Florida CORPORATION SERVICE COMPANY	4.	Document number
Registered Agent and Registered Office shown on the records of 1201 HAYS STREET	the Florida Dep	
Registered Office Address (MUST BE FLORIDA STREET)	ADD <u>RESS</u>	18. 18 1-5 H
TALLAHASSEE, FL	32301	18 HON 21
Corporate Creations Network Inc.		SSEE. FL
Enter aurae of NEW Registered Agent and/or NEW Registered	Office address	
11380 Prosperity Farms Road #221E		
NEW Registered Office Address:		
Palm Beach Gardens	33410	
imited liability company is not organized under the la ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li ere authorized by an affigmative vote of the members of	f the registere ability compa of the limited	ed office and the business office of the register any, it is hereby confirmed that the change(s) liability company or as otherwise provided in
icles of organization or the operating agreement of the		

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duiles, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of your change.

- Coluit	Carlos M. Alvarez, Special Secretary
Signature of Registered Agent	
	sion of Cumpanying and Day (1975 Tallaha

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