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(((H17000334604 3)))



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To:.

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCORP SERVICES INC

Account Number : 120120000007 Phone : (702)866-2500

Fax Number

: (702)866-2689

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

LLC REGISTERED AGENT CHANGE MULLIGANS LAKE WORTH ACQUISITION LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

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Corporate Filing Menu

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COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ	ECT: Mulligans Lake Worth Acquisi	tion LLC	
	Nar	ne of Limited	l Liability Company
Dear S	Sir or Madam:		
The er	nclosed Registered Agent/Registered Off	ice Change a	und fee(s) are submitted for filing.
Please	return all correspondence concerning th	is matter to t	he following:
Georg	gia Dorsam		
	Name of Person		
InCor	p Services, Inc.		•
	Firm/Company		
3773	Howard Hughes Parkway, Suite 500	S	
	Address		_
Las V	egas, NV 89169-6014		. et
	City/State and Zip Code		
	gedreports@incorp.com		
E	-mail address: (to be used for future and	ual report no	tification)
For fur	ther information concerning this matter,	please call:	
Geo	gia Dorsam	at (800	, 246-2677 ext. 6912
	Name of Person		Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS:	I	MAILING ADDRESS:
	Registration Section		Registration Maction
	Division of Corporations		Division of Carporations
	Clifton Building		P.O. Box 6327
	2661 Executive Center Circle	-	Fallahassee, Florida 32314
	Tallahasses, Florida 32301		
	Enclosed is a check for the following	amount:	
	☑ \$25 Filing Fee	п	\$55 Filing Fee & Certified Conv

INHS18 (2/14)

H170003346043

INHS18 (2/14)

H170003346043

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.

	10 Ocean Blvd 7 & 8	(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)
	Lake Worth, FL 33460		
	12/29/2015	M150	000010370
	Date of filing/registration in Florida	4.	Document number
(a)	CORPORATION SERVICE COMPANY		
(4)	Registered Agent and Registered Office shown on the records of	f the Florida Dept.	of State;
	1201 Hays Street		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	
			<u> </u>
	Tallahanna	20224 05	
	Tallahassee, F	L 32301-25	25
ሌ ነ	inCorp Services, Inc.		
(b)	Enter name of NEW Registered Agent and/or NEW Registers	d Office addresses	一
	THE TRANSPORT OF THE PROPERTY		7 . 5.
	17888 67th Court North		10. 5. Okt
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	17888 67th Court North		ORUDA
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	17888 67th Court North	33470	——————————————————————————————————————
	17888 67th Court North NEW Registered Office Address: Loxahatchee	L 33470	——————————————————————————————————————
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cha nt w i/we artic	17888 67th Court North NEW Registered Office Address: Loxahatchee Filmited liability company is not organized under the lange or changes are made, the Florida street address or ill be identical. Or, in the case of a Florida limited in authorized by an affirmative vote of the members cles of organization or the operating agreement of the	L 33470 lws of the State f the registered iability compan of the limited lie limited liability	of Florida, it is hereby confirmed that after office and the business office of the register by, it is hereby confirmed that the change(s) is bility company or as otherwise provided in ty company.

FILING FEE: 325,00

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