M1600001639

| (Requestor's Name) | | | | | |
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| (Address) | | | | | |
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| (Address) | | | | | |
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| (Ci | ty/State/Zip/Phon | e #) | | | |
| PICK-UP | MAIT | MAIL | | | |
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| (Bi | usiness Entity Nar | me) | | | |
| (Document Number) | | | | | |
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| Certified Copies Certificates of Status | | | | | |
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| Special Instructions to Filing Officer: | | | | | |
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Office Use Only



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06/06/17--01028--017 **25.00





CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ashley Jiminez ashley.jiminez@cscqlobal.com

Date: June 2, 2017

Order#: 656094-219

Re: FD BEACH BLVD, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ashley Jiminez c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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. N | ame of the limited liability company: FD BEACH BLV | D, LLC | | |
|---------------------------------------|--|--|---|---|
| 2. (a) | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | (b) | | OLVO PARKWAY Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) |
| | CHESAPEAKE VA 23320 | | CHESAI | PEAKE, VA, 23320 |
| 2 | 02/24/2016 | | M160000 | |
| 3. | Date of filing/registration in Florida | 4. | | Document number |
| 5. (a | | | | _ |
| | Registered Agent and Registered Office shown on the records of the | he Florida | Dept. of Stat | e: |
| | 1200 SOUTH PINE ISLAND ROAD | | | _ |
| | Registered Office Address (MUST BE FLORIDA STREET ADDRESS) | | | |
| | | | | |
| | PLANTATION , FL | 33324 | | HASS - 6 |
| (b) | Corporation Service Company | | | |
| (0) | Enter name of NEW Registered Agent and/or NEW Registered | Office add | ress: | |
| | | | | |
| | 1201 Hays Street | | | |
| | NEW Registered Office Address: | | | |
| | | | | - |
| | Tallahassee , FL | 32301 | | - |
| the ch agent was/w the art | limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia tere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the law of a member or authorized representative of a member | the regist bility con f the limi limited li | ered officenpany, it interest in the contract of the contract | e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in |
| provis the ob to men notifie | by accept the appointment as registered agent and agre- ions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address, I had in writing of this change. | performa I for in Ca ereby coa | nce of my hapter 60: ifirm that | duties, and I am familiar with and accept 5. F.S. Or. if this document is being filed |