Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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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.

) .		ſ	b)				
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `		Mailing address o	Hinrico Habili	y compan	
	No change						
	(14/15/2016		M1600000	3139	· — — · · · · · · · · · · · · · · · · ·		
	Date of filing/registration in Florida	4.		Document nu	mber		
	Joseph G Lubeck						
ı)	Registered Agent and Registered Office shown on the records of	the Flori	la Dupt of Sta	ite:			
	11911 US Highway 1, Suite 204						
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRE.	357	-			
	North Palm Beach , FL	33408			9	20	
)	C T Corporation System			_	TACK TACK	ال 19	
,	Enter name of NEW Registered Agent and/or NEW Registered	Office H	ddzess:		25	7	
	(200 South Pine Island Road				CRETARY OF ALLAHASSE	12 F	
	NEW Registered Office Address:				が発	¥	
	Suite 250				1 S	ယ္	
	Plantation , Fi	33324			ATE	<u>ა</u>	
t v	imited liability company is not organized under the la inge or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited l' cre authorized Man affirmative vote of the members cles of organization or the operating agreement of the	f the replaced in the line of the limited	gistered offi company, it mited liabil	ce and the busi is hereby confi ity company or	aest attice a	i inc reg	151
(I) d	ture of a measure or authorized representative of a member			Printed or type	d name of signs		
	by accept the appointment as registered agent and agens of the proper and complete iguiting of the proper and complete iguiting of the proper agent as provide by reflect a change in the registered agent as provided in writing of this change.	ree to a e perfor ed for in hereby	ict in this ca mance of m Chapter 60 confirm tha	pacity. I further further full for the limited lice Alfred	er agree to c am familiar v his documer ability compo	omply w with and it is bein my has b	ith ac See

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FILING FEE: 525.00