M16000005014

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



100320300811

100320300811 11/01/13-01023--01 ++25.00

FILTU A 5:3

1116/18 05

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJI	SuttonPark Capital LLC			
.501991		ae of Limite	ed Liability Company	
Dear S	ir or Madam:			
The en	closed Registered Agent/Registered Off	ice Change	and fee(s) are submitted for filing.	
Please	return all correspondence concerning th	is matter to	the following:	
Frede	rick A. Love			
	Name of Person		·	
			· • • • • • • • • • • • • • • • • • • •	
	Firm/Company			•
2255	Glades Road, Suite 118E		<u> </u>	
	Address		လ် >	
Boca	Raton, FL 33431		 ယ ယ	
-	City/State and Zip Code			
flove@	②suttonpark.com			
Е	-mail address: (to be used for future ann	iual report n	notification)	
For fur	ther information concerning this matter.	. please call	:	
Frede	rick A. Love	212	537-8806	
	Name of Person	"· \	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
	Enclosed is a check for the following	(amount:		
	☑ \$25 Filing Fee	ū	1 \$55 Filing Fee & Certified Copy	

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.

L. Na	ame of the limited liability company: SuttonPark Ca	apital L	LC	
2. (a)	Principal office address of limited liability company:	_ (b)	Mailing address of limited liability company:
	(Note: MUST BE STREET ADDRESS)			(Note: MAY BE POST OFFICE BOX)
	2255 Glades Road, Ste 118E	_	2255 G	lades Road, Ste 118E
	Boca Raton, FL 33431	_	Boca R	aton, FL 33431
•	6/22/2016		M16000	005014
3	Date of filing/registration in Florida	4.		Document number
5. (a)	CT Corporation System			
J. (a)	Registered Agent and Registered Office shown on the records of the 1200 South Pine Island Road	ne Florida	Dept, of Sta	
	Registered Office Address (MUST BE FLORIDA STREET A.	<u>DDRESS</u>	7	
	Plantation ,FL	33324	-	
(b)	Frederick A. Love			> 5
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office ad	dress:	 بن الم
	2255 Glades Road, Ste 118E			3.
	NEW Registered Office Address:			_
	Boca Raton FL	33431		_
the cha agent v was/we	imited liability company is not organized under the law inge or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited lial ere authorized by an affirmative vote of the members of cles of organization of the operating agreement of the I	the regist bility co the limited l	stered offic impany, it ited liabili	ce and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany.
Şigna	ture of a member or authorized representative of a member			Printed or typed name of signee
provisi the obl to mer	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address. The l'in writing of this change.	re to act perform for in C ereby co	in this cap ance of my Thapter 60 onfirm that	pacity. I further agree to comply with the edules, and I am familiar with and accept 15, F.S. Or, if this document is being filed the limited liability company has been
Signatu	re of Registered Agent			
	Division of Corporations P.O. B	ox 6327	'• Tallaha	issee, FL 32314