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06/18/20--01006--025 **25.



AUG 0 4 2020 S. YOUNG

COVER LETTER

TO: **Registration Section** Division of Corporations

SuttonPark Capital LLC SUBJECT:

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Frederick A. Love

Name of Person

SuttonPark Capital LLC

Firm/Company

2255 Glades Road, Ste 100E

Address

Boca Raton, FL 33431

City/State and Zip Code

flove@suttonpark.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

561 425-8148 Victoria Garcia at (Area Code & Daytime Telephone Number Name of Person Mailing Address: Street Address: **Registration Section Registration Section Division of Corporations Division of Corporations** The Centre of Tallahassee P.O. Box 6327 Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 Enclosed is a check for the following amount:

\$25 Filing Fee

□ \$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability co submits the following statement in order to change its registered office or registered agent, or both, in the State of F

1. N	ame of the limited liability company:	apital LLC	
2. (a)		(t	D)
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability compa (Note: MAY BE POST OFFICE BOX
	2255 Glades Road, Ste 100E		2255 Glades Road, Ste 100E
	Boca Raton, FL 33431		Boca Raton, FL 33431
	06/22/2016		M1600005014
3.	Date of tiling/registration in Florida	4.	Document number
5. (a	Frederick A. Love		
(b)	Registered Agent and Registered Office shown on the records of Registered Office Address 2255 Glades Road, Ste 118E Boca Raton Frederick A. Love Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office Address:</u>	<u>т ADDRESS</u> 	≥ 2020 2020 2020 2020
	2255 Glades Road, Ste 100E		
	Boca Raton	5L 33431	
chang agent was/w	limited liability company is not organized under the le or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited vere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the difference of a member of the difference of a member	aws of the he registere liability co s of the lim he limited l	ed office and the business office of the registe ompany, it is hereby confirmed that the change nited liability company or as otherwise provide

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

Signature of Registered Agent

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