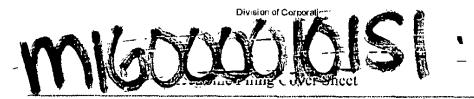
3/20/2017



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(((H170000768813)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

: (614)280-3338

Phone

Fax Number : (954)208-0845

*Ent	er	the	email	address	for	this	busin	e 55	entity	to	be	used	for	fu
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LLC REGISTERED AGENT CHANGE INCLENBERG INVESTMENTS FLORIDA LLC

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Corporate Filing Menu

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COVER LETTER

TO:	Registration Section Division of Corporations							
SUBJ								
	Name of Limited Liability Company							
Dear S	Sir or Madam:							
The er	nclosed Registered Agent/Registered Office Change and fee(s) are submitt	ed for filing.						
Please	e return all correspondence concerning this matter to the following:							
	DUEW M. CAPONE Name of Person	ı						
	INCLEUBERG INESTMENTS FIGHT, CCC	te						
B-392-7-	TWILENBERG INESTMENTS FIGREDA, CEC Firm/Company 350 Roy An VAIM Wity STE 501 Address	· · · · · · · · · · · · · · · · · · ·						
	BAZIN BEACH, FZ 33480	F1 SEGRET						
	City/State and Zip Code	お答って						
	E-mail address: (to be used for future annual report notification)	SEE D						
,	E-mail address: (to be used for future annual report notification)	FLOG STA						
For fu	orther information concerning this matter, please call:	A STEP STEP						
4	Ellew M. CAPONE at (914) 202	3152						
	Name of Person Area Code & D	Daytime Telephone Number						
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRE Registration Section Division of Corporat P.O. Box 6327 Tallahassee, Florida	tions ।उ						
	Enclosed is a check for the following amount:							
	□ \$25 Filing Fee □ \$55 Filing Fee & C	ertified Copy						
INHS	18 (2/14)							

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100

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.

	ne of the limited liability company:					
. (-) _		(
	Principal office address of limited fiability company: (Nate: MUST BE STREET ADDRESS)	\		Mailing address of limited liability company: (Note: MAYBE POST OFFICE BOX)		
	350 Royal Palm Way, Suite 501		PO Box-27	70		
	Palm Beach, FL 33480		Palm Beac	Palm Beach, FL 33480		
	12/19/2016		M16000010	0151		
	Date of filing/registration in Florida	4.		Document number		
. (a)	Corporation Service Company					
	Registered Agent and Registered Office shown on the records of Registered Office Address	_				
	1201 Hays Street					
•	Taliahassee , FL	32301		-		
:	, FL	·		📥 يىد		
(b) _						
, , [Enter name of NEW Registered Agent and/or NEW Registered	空岛 多				
	C T Corporation System			SECRETARY OF STALLAHASSEE, FL		
	NEW Registered Office Address:		空紀 至			
	1200 South Pine Island Road			9		
•				- 17 5		
	Plantation , FL	33324		-		

Division of Corporations P.O. Box 6327 Tallahassee, FL 3231 FILING FEE: \$25.00