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COVER LETTER

TO: Registration Section Division of Corporations		
823 MAXWELL, LLC SUBJECT:		
· · · · · · · · · · · · · · · · · · ·	of Limited L	iability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Offic	e Change and	fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to the	following:
John J. Thresher, Esquire		
Name of Person		•
Amico Law Group		
Firm/Company		 -
4400 118th Avenue N. Suite 100		
Address		
Clearwater, FL 33762		
City/State and Zip Code		
thresher@amicolawgroup.com		
E-mail address; (to be used for future annu	al report notif	ication)
For further information concerning this matter, p	lease call:	
John J. Thresher, Esquire	813 _ at (545-4)666
Name of Person	_ ((()	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following a	mount:	
• \$35 Filling Fee	□ \$:	55 Filing Fee & Certified Copy
INHS13 (2/14)		

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.

•		(b) ⁻	st Office Box 6071
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	· · · · · · · · · · · · · · · · · · ·	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Boulder, CO 80304		ılder, CO 80306
	07/14/2017	M170	000006021
	Date of filing/registration in Florida	4.	Document number
(a)	Richard Haskin;		
A	Registered Agent and Registered Office shown on the records of 3685 Seaside Drive	the Florida Dept	12
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	2022 FEBIL AM SECRETARY OF TALLAHASSEE
	Key West, FI		
(b)	Richard Haskins		A J. 6 SSEE. FL
	Enter name of NEW Registered Agent and/or NEW Registered	FL	
	3034 Riviera Drive		,,,
	NEW Registered Office Address:		
	Key West		
	FI	*	
nge nt w s≉ve	mited liability company is not organized under the la or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited li re authorized by an affirmative vote of the members of the of organization or the operating agreement of the	registered off ability compar of the limited l limited liabili	fice and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in ity company.
ignat	use of a meryber or authorized representative of a member		Printed or typed name of signee
wisie obli nere	the specific the appointment as registered agent and agent of all statutes relative to the proper and complete gations of my position as registered agent as provide by reflect a change in the registered office address, I thin writing of this change.	ree to act in th performence d for in Chapt hereby confirm	is capacity. I further agree to comply with the of my duties, and I am familiar with and accepter 605, F.S. Or, if this document is being filed in that the limited liability company has been