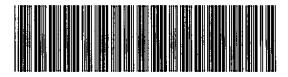
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(Requestor's Name)					
(Address)					
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(Cit	ty/State/Zip/Phone	e #)			
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PICK-UP	WAIT	MAIL			
(Bu	siness Entity Nan	ne)			
,	•	,			
(Da	accompany Nicomban				
(100	cument Number)				
Certified Copies	_ Certificates	of Status			
Special Instructions to	Eiling Officer				
Special Instructions to Filing Officer:					
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COVER LETTER .

INHS18 (2/14)

	egistration Section ivision of Corporations					
SUBJECT	Sullivan Asset Holdings, LLC					
	Name of Limited Liability Company					
Dear Sir o	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:						
Donna (Colavito					
	Name of Person					
Granite	Associates, Inc.					
	Firm/Company					
225 Ban	nyan Boulevard, Suite 130					
	Address					
Naples,	FL 34102					
	City/State and Zip Code					
dcolavite	o@granitelp.com					
E-ma	ail address: (to be used for future annual	report notifica	tion)			
For furthe	r information concerning this matter, ple	ease call:				
Louis J.	Boyd	239	228-6505			
	Name of Person	·	Area Code & Daytime Telephone Number			
R6 D C1 26	rreet/courier address: egistration Section ivision of Corporations lifton Building 661 Executive Center Circle allahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
E	Enclosed is a check for the following amount:					
Ø	\$25 Filing Fee	□ \$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.

i. Na	me of the limited liability company: Sullivan Asse	t Holdi	ngs, LLC		
2. (a)	225 Banyan Boulevard	a	(b) 225 Banyan Boulevard		
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Suite 130	(1	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
			Suite 13	U	
	Naples, FL 34102		Naples,	FL 34102	
	August 24, 2017		M170000	07386	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	United Corporate Services, Inc.				
υ. (u)	Registered Agent and Registered Office shown on the records of 9200 South Dadeland Blvd	the Florida	a Dept. of State	- ::	
	Registered Office Address (MUST BE FLORIDA STREET A	ADDRESS	<u>2)</u>		
	Suite 508				
	Miami , FL	33156	1	ALLAN	
(b)	Granite Associates, Inc.			FILE PA	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office ad	dress:	m.	
	225 Banyan Boulevard			PH 3: 42 FLORIDA	
	NEW Registered Office Address:			DA F	
	Suite 130				
	Naples , FL	34102			
the cha agent v was/we the arti	imited liability company is not organized under the lawinge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited liabre authorized by an affirmative vote of the members of case of organization or the operating agreement of the	the regi ability co of the lin limited	stered office ompany, it is nited liability liability con	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in inpany.	
	ture of a member or anthorized representative of a member		uis J. Boyo	Printed or typed name of signee	
I herei provisi the obl to mere	by accept the appointment as registered agent and agroups on sof all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I it in writing of this change.	ree to ac perform d for in t hereby c	t in this cap lance of my Chapter 605 onfirm that	acity. I further agree to comply with the	
Signatu	re of Registered Agent	. (26)	7. Tallahar		