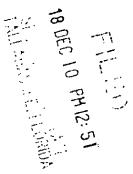
# 1118000001095

(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:				

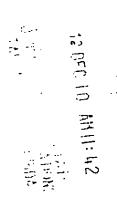
Office Use Only



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K SALV DEC 1 2 2018

## SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 12/10/2018	<del></del>	
	LEWIS LODGE LBK LLC	**WALK IN**
ENTITY NAME	LEWIS LODGE LBK, LLC	
DOCUMENT NUMBER	R	
	**PLEASE FILE THE ATTACHED AND RETURN**	
XXX	Plain Copy	
	Certified Copy	
<del></del>	Certificate of Status	
	Certified Copy of Arts & Amendments Certificate of Good Standing	
	**APOSTILLE' / NOTARIAL CERTIFICATION**	<del></del>
COUNTRY OF DESTIN NUMBER OF CERTIFIC		- <del></del>
TOTAL OWED \$25	.00 СНЕСК #_5525	
Please call Tina at	the above number for any issues or concerns. Thank you	so much!



December 11, 2018

SUNSHINE CORPORATE FILING OF FLORIDA INC.

SUBJECT: LEWIS LODGE LBK, LLC

Ref. Number: M18000001095

We have received your document for LEWIS LODGE LBK, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly Regulatory Specialist If

> € 275 -

Please allow for inteal file date.

Letter Number: 318A00025336

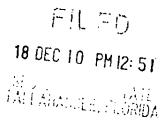
### COVER LETTER

TO: Registration Section Division of Corporations					
Division of Corporations					
SUBJECT: LEWIS LODGE LBK, LLC					
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:					
Daniel K. Mannion, Esq.					
Name of Person					
Hancock Estabrook, LLP					
Firm/Company					
100 Madison Street, 1500 AXA Tower I					
Address					
Syracuse, New York 13202					
City/State and Zip Code					
glewis@aspendental.com					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Linda A. McLean, Paralegal at (315) 565-4722					
Name of Person Area Code & Daytime Telephone Number					
STREET/COURIER ADDRESS: MAILING ADDRESS:					
Registration Section Registration Section					
Division of Corporations Division of Corporations					
Clifton Building P.O. Box 6327					
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301					
Enclosed is a check for the following amount:					
☑ \$25 Filing Fee & Certified Copy					
INHS18 (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.

1. 3	Name of the limited liability company: Lewis Lodge LB	K, LLC		
	) 560 Yardarm Lane, Longboat Key, Ft. 34228		(b) 2520 State Route 174, Marietta, NY 13110	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
3.	01/31/2018  Date of filing/registration in Florida	<u>M18</u> 4.	000001095 Document number	
5. (a		··		
	Registered Agent and Registered Office shown on the records of	f the Florida Dep	t. of State:	
	Paracorp, Inc.		co <b>d</b>	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		三 品一	
	155 Office Plaza Drive, 1st Floor			
	Tallahassee , FI	32301		
(b)	Paracorp Incorporated  Entername of NEW Registered Agent and/or NEW Registered  155 Office Plaza Drive, 1st Floor  NEW Registered Office Address:			
	Tallahassee ,FL	_ 32301		
the ch agent was/w	limited liability company is not organized under the law lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of the operating agreement of the	f the registered ability compa of the limited limited liabil	d office 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.	
Sign	ature of member an authorized representative of a member		Printed or typed name of signee	
he ob o mei	eby accept the appointment as registered agent and agi sions of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address, I i ad in writing of this change.	ree to act in the performance d for in Chap hereby confirt	ale agaggity. I fouther among an annual could the	
Attac				
Signati	ure of Registered Agent			



## STATE OF FLORIDA

#### REGISTERED AGENT CONSENT FORM

DATE:

12/7/18

ENTITY NAME:

LEWIS LODGE LBK, LLC

#### REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee, FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statues.

Leticia Herrera, Assistant Secretary

Yessery

Paracorp Incorporated