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COVER LETTER

Division of Corporations				
SUBJECT: S/ELA GP, Inc. Name of C	Corporation			
DOCUMENT SHAIDED. D00000026544				
DOCUMENT NUMBER: P99000026514				
The enclosed Statement of Change of Registered Offi	ce/Agent and fee are submitted for filing.			
Please return all correspondence concerning this matter	er to the following:			
Kathy Moro				
Name of Co	ontact Person			
Emple Wainhows Blook	Di			
Frank Weinberg Black, Firm/C	Company			
	, ,			
7805 SW 6th Court	dress			
, vu	ures.			
Plantation, FL 33324				
City/State a	and Zip Code			
	,			
Lynda.Watkins@Stiles.com KMoro@fwblaw.net				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please	call:			
Lynda Watking	at (954) 627-9350			
Lynda Watkins Name of Contact Person	Area Code & Daytime Telephone Number			
Name of Confact Person	Area Code & Daytine Telephone Number			
Enclosed is a \$35.00 check made payable to the Depa	rtment of State.			
Mailing Address:	Street Address:			
Amendment Section	Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

TO: Amendment Section

> STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of char	nge is submitted for a corporati	2, 617.0502, 607.1508, or 617.1508, Florida Statute ion organized under the laws of the State of <u>Florid</u> or registered agent, or both, in the State of Florida	la	_
1. The name of t	he corporation: <u>S/ELA GP, In</u>	ic.		
2. The principal	office address: 301 East Las	Olas Boulevard; Fort Lauderdale, FL 33301		
3. The mailing ac	ddress (if different):		~	
4. Date of incorp	poration/qualification: 03/23/19	99 Document number: <u>P99000026514</u>	ļ	
	street address of the current retiment of State: (If resigned, ent	egistered agent and registered office on file with the er resigned)		
CORPORATION SERVICE COMPANY				
1201 HAYS STREET				
TALLAHASSEE, FLORIDA 32301-2525				
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				ILED
(11 changes).	FRANK WEINBERG & BLACK P.L.		. 	
	1875 NW CORPOR	RATE BLVD SUITE 100 TSCH, ESQ		
		O. Box. NOT acceptable		
	BOCA RATON, FL	33431		
The street address as changed will	ss of its registered office and the identical.	he street address of the business office of its regist	tered ag	ent,
Such change wa authorized by the	s authorized by resolution duly e board, or the corporation has	y adopted by its board of directors or by an officer sbeen notified in writing of the change.	· 80	
Signatur	e of an officer of diffector	Printed or typed name and title		
I further agree to performance of this agent. Or, if this	o comply with the provisions o my duties, and I am familiar w document is being filed mevel	agent and agree to act in this capacity. of all statutes relative to the proper and complete ith and accept the obligation of my position as res by to reflect a change in the registered office addression inotified in writing of this change.	gistered 288, I	
		9/6/2017		
	attere of Registered Agent	Date		
If signing on bel	steven w. Deutsch			
Ty	ped or Printed Name			
	* * * FII	ING FEE: \$35.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314