A97000001316

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

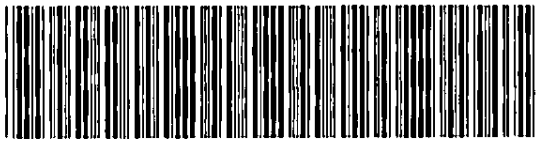
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE
MAY 14 2025

Office Use Only



100443543541

FILED
2025 MAY 13 PM 12:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
2025 MAY 13 AM 11:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CT CORP

(850) 656- 4724
3458 lakesore Drive
Tallahassee, FL 32312

Date: 05/13/2025

Acc#I20160000072

Name:	82 Westminster, LP
Document #:	
Order #:	16314069

Certified Copy of Arts & Amend:	☐			
Plain Copy:	☐			
Certificate of Good Standing:	☐			
Certified Copy of	☐			
Apostille/Notarial Certification:	☐		Country of Destination:	
			Number of Certs:	

Filing: ☑	Certified: ☑	Email Address for Annual Report Notifications:
	Plain: ☐	
	COGS: ☐	

Availability _____

Document ___
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: $ 87.50

Thank you!

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 82 Westminster, LP
Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: A97000001316

The enclosed Statement of Change of Registered Office and/or Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Thomas B. Reynolds
Contact Person

Thomas B. Reynolds, P.C.
Firm/Company

2970 Peachtree Road, N.W. Suite 265
Address

Atlanta, GA 30305
City, State and Zip Code

caoneal@tbrpc.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Charlotte Ann O'Neal at (404) 961-0001
Name of Contact Person — Area Code and Daytime Telephone Number

Enclosed is a $35.00 check made payable to the Florida Department of State.

STREET ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

FILED
2025 MAY 13 PM 12:53

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. 82 Westminster. LP
Name of Limited Partnership or Limited Liability Limited Partnership

2. 06.12.97
Date of filing/registration in Florida

3. A97000001316
Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Marc R. Gaylord, P.A.
Name

12000 SE Dixie Highway
Address

Hobe Sound, FL 33455
City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

C T Corporation System
Name

1200 South Pine Island Road
Florida street address (P.O. Box not acceptable)

Plantation, FL 33324
City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

Signature of General Partner

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent.

Theresa Buck, Assistant Secretary
Signature of Registered Agent

Filing Fee: $35.00
Certified Copy (optional): $52.50