

2/15/2021
 Division of Corporations
 Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

B1800000308

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To:
 Division of Corporations
 Fax Number : (850)617-6383

From:
 Account Name : URS AGENTS LLC
 Account Number : I20150000127
 Phone : (800)567-4397
 Fax Number : (800)567-4398

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: hstorch@brassenterprises.com

**REGISTERED AGENT CHANGE
 DEDICATED HERMITAGE, LP**

Certificate of Status	0
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DEDICATED HERMITAGE, LP
Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: B1800000308

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:

Ephraim Morkur
Contact Person

DEDICATED HERMITAGE, LP
Firm/Company

970 LAWRENCE AVE. W, S. 401
Address

TORONTO, ONTARIO M6A3B6
City, State and Zip Code

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

For further information concerning this matter, please call:

URS Agents ATTN Kanetha Blahop at (800) 367-4397
Name of Contact Person Area Code and Daytime Telephone Number

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

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

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

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. DEDICATED HERMITAGE, LP
Name of Limited Partnership or Limited Liability Limited Partnership

2. 11/30/2018 Date of filing/registration in Florida
3. B18000000308 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:

NRAI SERVICES, INC.
Name
1200 SOUTH PINE ISLAND RD
Address
PLANTATION, FL 33324
City, State and Zip

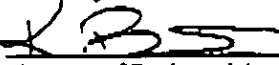
5. The name and Florida street address of the new registered agent and/or office:

URS AGENTS, LLC
Name
3458 LAKESHORE DR
Florida street address (P.O. Box not acceptable)
TALLAHASSE FL 32312
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.


Signature of Registered Agent

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

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