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(Re	equestor's Name)	·- <u></u>
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SECRETARY OF STATE



## **COVER LETTER**

_	istration Section ision of Corporations	
SUBJECT	Fort Family 3 - Directed (Name of L	Capital Resources, LLC imited Liability Company)
Dear Sir or	Madam:	
The enclose	ed Registered Agent/Registered O	ffice Change and fee(s) are submitted for filing.
Please retur	n all correspondence concerning	this matter to the following:
Gary S. I	Phillips, Esquire	
	(Name of Person)	
Phillips,	Cantor & Berlowitz, P.A. (Firm/Company)	
4000 Hol	llywood Blvd., Suite 375 Sc	outh
	(Address)	# 07 E
Hollywood	d, FL 33021	
	(City/State and Zip Code)	: 58
For further	information concerning this matte	er, please call:
Gary S. F	Phillips, Esg.	at (954 ) 966-1820
	(Name of Person)	(Area Code & Daytime Telephone Number)
Regi Divi Clift 2661	REET/COURIER ADDRESS: istration Section ision of Corporations ion Building I Executive Center Circle ahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enc	losed is a check for the following	g amount:
□\$	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 608.416 or 608.508, 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. The name of the limited liability company is: Fort Family 3 - Directed Capital Resources, LLC	٠.
2. The mailing address of the limited liability company is : 801 Brickell Avenue, Suite 1100	
Miami, Florida 33131	
05-30-2003 L03000019577	
3. Date of filing/registration in Florida  4. Document number	
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:	
Gary S. Phillips, Esq.	
Name	
4000 Hollywood Blvd., Suite 265 South	
Address	
Hollywood, FL 33021	
City, State and Zip	_
6. The name and address of the new registered agent and/or office:	} = □
Gary S. Phillips, Esq.  Name  4000 Hollywood Blvd., Suite 375 South  Florida street address (P.O. Box NOT acceptable)	=
Name = Name	
4000 Hollywood Blvd., Suite 375 South	
Florida street address (P.O. Box NOT acceptable)	
Hollywood FL 33021	
City, State and Zip	•
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.  (Signature of a Member of authorized representative of a member)	
Bernardo Fort, Managing Member	
(Printed or typed name of signee)	
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 and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.	

(Signature of Registered Agent)