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ALLAHASSEE. FLORIDA

T. CLINE DEC 1 6 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: 2020 HARRISON LLC (Name o	of Limited Liability Company)	Ħ
Dear Sir or Madam:		
The enclosed Registered Agent/Registered O	ffice Change and fee(s) are submitted for filing.	
Please return all correspondence concerning t	this matter to the following:	
Cristina D. Moinelo		
(Name of Person)		
CBA REALTY & MANAGEMENT CORP (Firm/Company)	 	201
16375 N.E. 18th Avenue, Suite 325	ECRETA AHA	2000 DEC 15
(Address)	HASSEE. FLORIDA	S PR
N.M.B FL 33162 (City/State and Zip Code)		PH 1: 07
For further information concerning this matte	er, please call:	
Cristina D. Moinelo (Name of Person)	at (305) 948-9311 (Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed 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. Name of the limited liability company: 2020 HARR	ISON LLC	.
2. (a) Principal office address of limited liability company (<i>Note: MUST BE STREET ADDRESS</i>)	275 Madison Avenue, Suite 702	6) 0 9
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	Same	8
MAY 26, 2005 3. Date of filing/registration in Florida	L05000052608 4. Document number	
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:	
Registered Agent:	Jay s. Goldman	
Registered Office Address:	USA Commercial Residential, Inc. 21406 W. Dixie Highway Miami, Florida 33180	6
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>		
NEW Registered Agent:	Cristina D. Moinelo	16 E XMANUE: E XMANUE:
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	CBA REALTY & MANAGEMENT CORPY 16375 N.E. 18th Avenue, Suite 325 N.M.B p,FL 83162	regrise;
If the limited liability company is not organized under the I that after the change or changes are made, the Florida stree office of the registered agent will be identical. Or, in the can hereby confirmed that the change(s) was/were authorized be liability company or as otherwise provided in the articles of limited liability company.	t address of the registered office and the business ase of a Florida limited liability company, it is	
(Signature of a member or authorized representative of a member) (Printed or typed name of signee)	-	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the program familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited hadility company has been notified (Signature of Registered Agent)	gree to act in this capacity. I further agree to oper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, hange in the registered office address, I hereby in writing of this change.	,

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00