## L160000 40795

(Requestor's Name)				
(Address)				
(Address)				
,				
(City/State/Zip/Phone #)				
WAIT	MAIL			
c Entity Name)				
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ent Number)				
Certificates of	Status			
Special Instructions to Filing Officer:				
	te/Zip/Phone #)  WAIT  s Entity Name)  ent Number)  Certificates of s			

Office Use Only



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SEP 0 9 2014 C. CARROTHIL

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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. N	ame of the limited liability company: LITTLE HAY	VANA - 19	20 SW 2 ST, LLC
2. (a)			
() ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	<u> </u>	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	688 BREWERS BRIDGE ROAD, #2	f	688 BREWERS BRIDGE ROAD, #2
	JACKSON, NJ 08527	<u> </u>	JACKSON, NJ 08527
	04/19/2006	L	06000040795
3.	Date of filing/registration in Florida	<del>-</del> 4	Document number
5. (a)			
5. (a)	Registered Agent and Registered Office shown on the records o	f the Florida D	ept. of State:
	CORPDIRECT AGENTS, INC.		
	Registered Office Address (MUST BE FLORIDA STREET	• 99/43 · .	
	1200 SOUTH PINE ISLAND ROAD		
	PLANTATION, F	L 33324	
(b)	Enter name of NEW Registered Agent and/or NEW Registere		29 PH
(0)			
	SG REGISTERED AGENT LLC		13 34 34 34 34 34 34 34 34 34 34 34 34 34
	NEW Registered Office Address:		
	700 S. FEDERAL HIGHWAY, SUITE 200		
	BOCA RATON , F	<sub>L</sub> 33432	
the chagent was/w	limited liability company is not organized under the later ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited later authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the registe liability com of the limite	red office and the business office of the registered pany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in
Signs	Signature of a member or authorized representative of a member		Printed or typed name of signee
I here provis the ob to mer notifie	thy accept the appointment as registered agent and as ions of all statutes relative to the proper and complet ligations of my position as registered agent as providely reflect a change in the registered office address, and in writing of this change.	gree to act in e performan led for in Ch I hereby con	this capacity. I further agree to comply with the

1. . . .