

L07000128191

(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:

Office Use Only



500242305135

12/10/12--01011--021 **25.00

FILED
2012 DEC 10 PM 4: 16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

DEC 11 2012

EXAMINER

NEW CENTURY INVESTOR SERVICES, INC.

SUITE 365 • 600 CENTRAL AVENUE
HIGHLAND PARK, ILLINOIS 60035-3257
(847) 432-3666 FAX: (847) 432-4289

December 5, 2012

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Change of Registered Agent

Gentlemen:

In connection with the change of Registered Agent for the following limited liability companies, I am enclosing the following:

1. 29-31 Florida LLC – Statement of Change of Registered Agent for Limited Liability Company and check in the amount of \$25.00 in payment of the filing fee.
2. KB – Tranquility Lakes LLC – Statement of Change of Registered Agent for Limited Liability Company and check in the amount of \$25.00 in payment of the filing fee.
3. Lovely Hills Florida LLC – Statement of Change of Registered Agent for Limited Liability Company and check in the amount of \$25.00 in payment of the filing fee.
4. NAE Florida Palm LLC – Statement of Change of Registered Agent for Limited Liability Company and check in the amount of \$25.00 in payment of the filing fee.
5. Sagamore Florida LLC – Statement of Change of Registered Agent for Limited Liability Company and check in the amount of \$25.00 in payment of the filing fee.
6. VLC Florida Palm LLC – Statement of Change of Registered Agent for Limited Liability Company and check in the amount of \$25.00 in payment of the filing fee.

If you need any further information, please do not hesitate to contact us.

Very truly yours,

Patricia N. Prange
Assistant to Marilyn Rothschild

Enclosures

2012 DEC 10 PM 4: 16
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: 29-31 Florida LLC

2. (a) Principal office address of limited liability company: 600 Central Avenue, Suite 365
Highland Park, IL 60035-3257
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company: 600 Central Avenue, Suite 365
Highland Park, IL 60035-3257
(Note: MAY BE POST OFFICE BOX)

12/28/2007

L07000128191

3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: Jay Felner

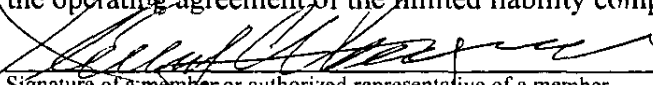
Registered Office Address: 4182 Live Oak Boulevard
Delray Beach, FL 33445

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent: Jeffrey S. Felner

NEW Registered Office Address: 6235 Floridian Circle
(MUST BE FLORIDA STREET ADDRESS) Lake Worth, FL 33463

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 or authorized representative of a member

Nathan Wagner, Treasurer of Manager

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

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

FILED
2012 DEC 10 PM 4:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA