

L110000049710

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

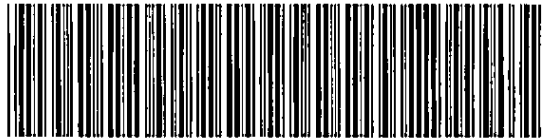
(Business Entity Name)

(Document Number)

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18 AUG 20 PM 14:37
TALLAHASSEE, FLORIDA

AUG 25 2018
S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 3-D Townhomes, LLC
Name of Limited Liability Company

FILED
18 JUL 20 PM 4: 37
TALLAHASSEE, FLORIDA

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

SHALOM YEHIEL or DORIS YEHIEL
Name of Person

S + D Townhomes, LLC
Firm/Company

Physical 501 Ixoria Ave., Fort Pierce, FL 34982
Address

mailing PO Box 1629, Fort Pierce, FL 34954
City/State and Zip Code

yehiel@bellsouth.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shalom or Doris Yehiel at (772) 302-6596
Name of Person 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 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 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. Name of the limited liability company: S + D TOWNHOMES, LLC

2. (a) 501 IXORIA AVE. Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
FORT PIERCE, FL 34982

(b) PO Box 1629 Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
FORT PIERCE, FL 34954

3. 4/27/2011 Date of filing/registration in Florida

4. L11000049710 Document number

5. (a) YEHIEL, SHALOM
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
5715 NW 85th AVENUE
 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
TAMARAC, FL 33321

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
501 IXORIA AVENUE
NEW Registered Office Address:
FORT PIERCE, FL 34982

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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] Signature of a member or authorized representative of a member

SHALOM YEHIEL Printed or typed name of signer

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 605, 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]
 Signature of Registered Agent