

L13000097745

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

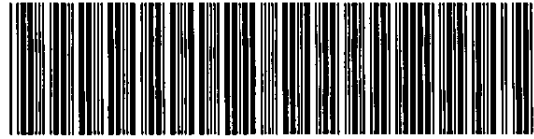
(Business Entity Name)

(Document Number)

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2014 JAN 27 PM 2:30  
CLERK OF STATE  
TALLAHASSEE FLORIDA

JAN 30 2014  
D. BRUCE

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** MARKET STREET REAL ESTATE PARTNERS, LLC  
Name of Limited Liability Company

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:

**JUDY CULVER**

Name of Person

**CLAS INFORMATION SERVICES**

Firm/Company

**2020 HURLEY WAY, STE. 350**

Address

**SACRAMENTO, CA 95825**

City/State and Zip Code

**jc@clasinfo.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**JUDY CULVER**

Name of Person

at ( **800** ) **447-6237**

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2014 JAN 27 PM 2:30

**FILED**

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

Pursuant to the provisions of sections 605.0114, 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: MARKET STREET REAL ESTATE PARTNERS, LLC

2. (a) Principal office address of limited liability company: C/O MARKET STREET REAL ESTATE PARTNERS  
7600 RED ROAD - SUITE 102  
MIAMI, FL 33143  
**(Note: MUST BE STREET ADDRESS)**

(b) Mailing address of limited liability company: C/O MARKET STREET REAL ESTATE PARTNERS  
7600 RED ROAD - SUITE 102  
MIAMI, FL 33143  
**(Note: MAY BE POST OFFICE BOX)**

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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: KENNEY, JUDITH, PA

Registered Office Address: JUDITH KENNEY & ASSOCIATES, P.A.  
2001 BISCAYNE BLVD., SUITE 2620  
MIAMI, FL 33137


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

NEW Registered Agent: NRAI SERVICES, INC.

NEW Registered Office Address: 1200 SOUTH PINE ISLAND ROAD  
**(MUST BE FLORIDA STREET ADDRESS)** PLANTATION, FL 33324

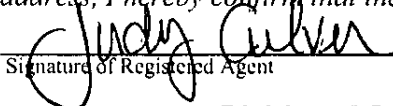
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TALLAHASSEE FLORIDA

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

ALLAN SERVIANSKY  
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 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 of Registered Agent

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