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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (614)280-3338 Phone Fax Number

: (954)208-0845

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:		<u> </u>	_
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## LLC REGISTERED AGENT CHANGE CCRE MEEK, LLC

K. SALY

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## **COVER LETTER**

TO:	Registration Section Division of Corporations		
SUBJI	CCRE Meek, LLC		4
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Nan	e of Limited	l Liability Company
Dear S	ir or Madam:		
The en	closed Registered Agent/Registered Off	ice Change	and fee(s) are submitted for filing.
Please	return all correspondence concerning th	s matter to	the following:
Eric N	adeau		·
	Name of Person		_ <del></del> _
Found	ry Commercial, LLC		
	Firm/Company		
420 S	Orange Ave Ste 950		
	Address		
Orland	do. FL 32801-4904		
	City/State and Zip Code		
eric.	nadeau@foundrycommercial.com		
<u>l</u>	E-mail address: (to be used for future and	nual report n	otification)
For fu	rther information concerning this matter	, please call	
Eric N	adeau	407	11. 757-1511
	Name of Person	at (	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		1 \$55 Filing Fee & Certified Copy
INHSI	18 (2/14)		

## 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.

. Na	me of the limited liability company: CCRF Meek, LL				
. (a) <u>.</u>	420 S. ORANGE AVENUE, #950	(b)	S. ORANGE AVENUE, #950		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	ORLANDO, FL 32801	ORL	LANDO, FL 32801		
	05/15/2015	M160	000009355		
	Date of filing/registration in Florida	4.	Document number		
4	JOAQUIN E. MARTINEZ				
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	—— • • • • • • • • • • • • • • • • • •		
	450 SO, ORANGE AVENUE		<b>5</b>		
	ORLANDO 5 F	L 32801 12	FE THE THE THE THE THE THE THE THE THE TH		
			1 1		
(b)			<b>~</b> ?₹		
(0)	Finter name of NEW Registered Agent and/or NEW Registere	d Office address:	H Pos		
	C T Corporation System		AH 10: 38		
	NEW Registered Office Address:		.,,		
	1200 South Pine Island Road				
	Plantation, F	L_33324			
he cha gent v	imited liability company is not organized under the lange or changes are made, the Florida street address owill be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization of the operating agreement of the	of the registered liability compar s of the limited I	office and the business office of the registerny, it is hereby confirmed that the change(s) liability company or as otherwise provided in ity company.		
Signa	ature of a member or authorized representative of a member		Printed or typed name of signee		
rovisi he obl o merc totifiec	by accept the appointment as registered agent and a ions of all statutes relative to the proper and comple- ligations of my position as registered agent as providely reflect of finge in the registered office address, a d in writing of this change.	gree to act in th le performance led for in Chap I hereby confirt	his capacity. I further agree to comply with to fine duties, and I am familian with and accure 605, F.S. Or, if this document is being film that the limited liability company has been		

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