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LLC REGISTERED AGENT CHANGE 1000 SW 16TH AVE LLC

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EXAMINER

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.

I. Name of the limited liability company:	1000 SW 16TH AVE LLC
2. (a) Principal office address of limited liability compar	ny:
(<u>Note: MUST BE STREET ADDRESS</u>)	2071 FLATBUSH AVE STE 22 BROOKLYN, NY 11234
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	2071 FLATBUSH AVE STE 22 BROOKLYN, NY 11234
3/30/06	L06000033372
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	n the records of the Florida Dept. of State:
Registered Agent:	INCORP SERVICES, INC.
Registered Office Address:	17888 67TH COURT NORTH LOXAHATCHEE, FL 33470
•	
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:	
NEW Registered Agent:	INTERSTATE AGENT SERVICES, LLC
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1540 GLENWAY DRIVE
	TALLAHASSEE ,FL32301
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be idealiability company, it is hereby confirmed that the change of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member.	Florida street address of the registered office ntical. Or, in the case of a Florida-limited s) was/were authorized by an affirmative to the erwise provided in the articles of organization my.
ALEX ENGLARD - AUTHORIZED PERSON	
Printed or typed name of signee	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p and I am familiar with and accept the obligations of my p Chapter 608. F.S. Or, if this document is being filed to m address I thereby confirm that the limited liability company.	agree to act in this capacity. I further agree to roper and complete performance of my duties, osition as registered agent as provided for interely reflect a change in the registered office my has been notified in writing of this change.
Signature of Registered Agent	ALEX ENGLARD - SPECIAL SECRETARY

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