## 117000124547

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## **COVER LETTER**

TO:	Registration Section Division of Corporations				
SUBJE	2505 NW 20 STR	EET, LLC			
CODO	Name of Limited Liability Company				
Dear S	ir or Madam:				
The en	closed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.			
Please	return all correspondence concerning this matter	to the following:			
	Dorothy H. Irvin				
Name of Person					
		1			
		1			
	Firm/Company	1			
	2091 Bahama Drive				
	Address	<del>*************************************</del>			
	Miramar, Florida 33023				
	City/State and Zip Code	<del></del>			
E	-mail address: (to be used for future annual repor	1 notification)			
For fur	ther information concerning this matter, please ca	all:			
	Stephen M. Blackburn, Attorney	954-463-5266			
	Name of Person	Area Code & Daytime Telephone Number			
	STREET/COURIER ADDRESS:	MAILING ADDRESS:			
	Registration Section	Registration Section			
	Division of Corporations	Division of Corporations			
	Clifton Building	P.O. Box 6327			
	2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314			
	Enclosed is a check for the following amount:				
	<b>□</b> \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy			
INHS18	3 (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.

1.	Na	me of the limited liability company: 2505 NW	20 STREE	T, LLC
2	(a)	2505 NW 20 Street	(b)	2091 Bahama Drive
	(**)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
		Ft. Lauderdale, Fla. 33311		Miramar, Fla. 33023
		June 7, 2017	<del></del>	L17000124547
3.		Date of filing/registration in Florida	4.	Document number
5.	(a)	Law Office of Rashad Taylor,	PA !	
	( )	Registered Agent and Registered Office shown on the records of t	he Florida Dept. c	of State:
5205 SW 171 AVE				o. 33 . 7
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
	MIRAMAR, FL 33027		<u> </u>	
		FL		Document number  Of State:  OF St
(b)		Stephen M. Blackburn		
Enter name of NEW Registered Agent and/or NEW Registered Office address:				
		Attorney at Law		
		NEW Registered Office Address:	<del> </del>	<del></del>
		412 N.E. 4th Street		
		Ft. Lauderdale, Florida 3330	1	
the age wa	cha ent w s/we	mited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the registered oblits to the limited liable of the lia	office and the business office of the registered y, it is hereby confirmed that the change(s) ability company or as otherwise provided in
	` '	1. Thun 1.		Dorothy H. Irvin
	_	ute of a member or authorized representative of a member		Printed or typed name of signee
I he to to	erel ovisi obli mere uifiet	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete is attituded in the proper and complete is attituded in the proper and complete is attituded in the proper and rest as provided by reflect a charge in the profisered office address, I have a charge in the provided in the profisered office address, I have a charge in the profisered of the provided in the profisered of the profisere	ee to act in this performance of I for in Chapte ereby confirm	s capacity. I further agree to comply with the f my duties, and I am familiar with and accept r 605, F.S. Or, if this document is being filed that the limited liability company has been
Si	haiu	e of Registered Agent		