From: Katz Baskies & Wolf PLLC

4/25/22, 12:04 PM

Division of Corporations

Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : KATZ BASKIES & WOLF PLLC

Account Number : I20088000071 Phone : (561)910-5700 : (561)910-5701 Fax Number

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

REGISTERED AGENT CHANGE MILPORT INVESTORS, LLLP

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To: +18506176383

H220001487943

COVER LETTER

TO:	Registration Section Division of Corporations		
STERI	ECT: MILPORT INVESTORS, LLI	LP	
CDU	Name of Limited Parts	nership or Limited Lia	bility Limited Partnership
DOC	UMENT NUMBER: A01000000	384	
	nclosed Statement of Change of are submitted for filing.	Registered Office	and/or Registered Agent and
Please	e return all correspondence conc	erning this matter t	to:
тном	IAS O. KATZ		
	Contact Person		
KATZ	BASKIES & WOLF PLLC		
	Firm/Company		
3020 1	NORTH MILITARY TRAIL SUITE 10	00	
	Address		
BOCA	RATON, FL 33431		
	City, State and Zip Co	de	_ .
alex@	milton-construction.com		
<u>E</u>	-mail address: (to be used for future ar	inual report notification	on)
For fi	arther information concerning th	is matter, please ca	
Thom	as O. Katz	at ()910-5700
	Name of Contact Person	Area Coc	le and Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Florida Department of State.

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

INHS04 (01/06)

Certified Copy (optional): \$52.50

15615846859

LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

MILPOR	T INVESTORS, LI	LLP		
	Name of Limited Partnership or Li	mited Liability Limited Partnership		
2.03/15/2001 3.A0100000384		4		
	Date of filing/registration in Florida Florida document num		umber	
4. The name of the Department of State		d office address as shown on the recor	ds of the Florida	
	Lazaro Milton			
	• • •	ime		
	3711 SW 27th St	reet		
	Ade	dress		
	Miami, FL 3313	4		
		te and Zip		
5. The name and l	Florida street address of the new re			
	Alexander Milton	<u> </u>		
	N	ame		
	3711 SW 27th St	treet	2022	
	Florida street address (P.O. Box not acceptable)	AF	-
	Miami	FL33134_	2022 APR 25	7 2
	City, Sta	ue and Zip		
6. Such change(s)	is/are effective when filed by the	Florida Department of State.	AM 9: 4	00 12 D Z
Alexander	Du to		وب 🚆 بو	Ċ
Signature of Gene	rel Partner	-	47	•
I hereby accept the	ne appointment as registered agent	and agree to act in this capacity. I fu the proper and complete performance	rther agree to of my duties,	
and I am fayfiligr	with an accept the foligations of n	ny position as registered agent.		
Stan	and Multon			
Signature of Regi	stored Agent	- -		·
(7			
Filing Fee:	\$35.00			•