A01000001038

| (Requestor's Name) | | | | | |
|---|-------------------|-------------|--|--|--|
| (Address) | | | | | |
| (Address) | | | | | |
| (Cit | ty/State/Zip/Phon | e #) | | | |
| PICK-UP | ☐ WAIT | MAIL | | | |
| (Business Entity Name) | | | | | |
| (Document Number) | | | | | |
| Certified Copies | _ Certificates | s of Status | | | |
| Special Instructions to Filing Officer: | | | | | |
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G. MCLEOD

JAN 24 2011

EXAMINER



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01/21/11--01015--008 **35.00

11 JAN 21 PM 2:52 SECRETARY OF STATE FALLAHASSEE, FLORIBA

COVER LETTER

| TO: Registration Section Division of Corporations | | | | | |
|---|--------------------------------------|--|--|--|--|
| | | | | | |
| SUBJECT: HOLIDAY PARK PLAT | ZA LTD. | | | | |
| | | | | | |
| DOCUMENT NUMBER: A DI DODD 1 \$38 | | | | | |
| The enclosed Statement of Change of Registered O fee(s) are submitted for filing. | Office and/or Registered Agent and | | | | |
| Please return all correspondence concerning this ma | atter to: | | | | |
| George A. Morgan, Jr. | | | | | |
| Contact Person | | | | | |
| Morgan Property Group, LLC | | | | | |
| Firm/Company | | | | | |
| 450 E. Las Olas Blvd., Suite 730 | | | | | |
| Address | | | | | |
| Fort Lauderdale, FL 33301 | | | | | |
| City, State and Zip Code | | | | | |
| cfrye@morganpg.com | | | | | |
| E-mail address: (to be used for future annual report noti | fication) | | | | |
| For further information concerning this matter, plea | ase call: | | | | |
| _ Catherine Frye at (| 704) 909-4507 | | | | |
| | ea Code and Daytime Telephone Number | | | | |
| Enclosed is a \$35.00 check made payable to the Flo | orida Department of State. | | | | |
| STREET ADDRESS: | MAILING ADDRESS: | | | | |
| Registration Section | Registration Section | | | | |
| Division of Corporations | Division of Corporations | | | | |
| Clifton Building | P: O. Box 6327 | | | | |
| 2661 Executive Center Circle | Tallahassee, FL 32314 | | | | |
| Tallahassee, FL 32301 | | | | | |

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.

| 1. HOLIDAY | PARK PLAZA, L | TD. | | |
|---|--|----------------|----------------------|--------------------------|
| Name | of Limited Partnership or Limited | 1 Liability Li | mited Partnership | |
| 2. 07/a | 17/2001 | 3. A1 | カ1 ゆダダダロ | 61\$38 |
| Date of filing/re | gistration in Florida | <i>-</i> | Florida document n | umber |
| 4. The name of the regis Department of State: | tered agent and the registered offi | ce address as | shown on the record | ds of the Florida |
| | George A. Mor | gan, Jr. | | |
| | Name | | | |
| 300 S.E. Second Street, Suite 880 | | | | |
| | Address | | | |
| Fort Lauderdale, FL 33301 | | | | |
| | City, State and | l Zip | | |
| 5. The name and Florida | street address of the new register | ed agent and | /or office: | > 0 - |
| | George A. Mor | gan, Jr. | | |
| | Name | | | |
| | 450 E. Las Olas Blv | d., Suite 7 | 7 30 | JAN 21 RETAR AHASS |
| | Florida street address (P.O. I | | | |
| | Fort Lauderdale | FL | 33301 | FLO FSI |
| _ | City, State and | l Zip | | 52 AIE |
| 6. Such change(s) is/are | effective when filed by the Florid | a Departmen | t of State. | > |
| Tues & | | | | |
| Signature of General Par | m let | | | |
| comply with the provision | intment as registered agent and agent on and agent on the properties of the properties of the properties of the obligations of my poses. | oper and con | nplete performance o | |
| Signature of Registered | Agent | | | |
| , - | | | | |
| Filing Fee: | \$35.00 | | | |

Certified Copy (optional): \$52.50