

A0200000 1571

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

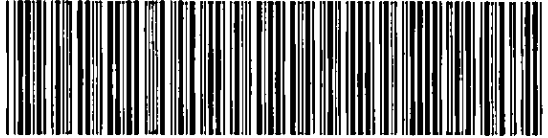
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

Office Use Only



800322845178

01/16/19--LIT--C-1 4:17..

19 JUL 19 15 11:56

JAN 25 1968

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NORTH MIAMI LAND HOLDINGS, LTD.
Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: A02000001571

The enclosed Statement of Change of Registered Office and/or Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Zena Clarke
Contact Person

c/o Stratus Investments, LLC
Firm/Company

6413 Congress Avenue, Suite 110
Address

Boca Raton, Florida 33487
City, State and Zip Code

zclarke@breezercooling.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Zena Clarke at (954) 312-4607
Name of Contact Person Area Code and Daytime Telephone Number

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

STREET ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

**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. NORTH MIAMI LAND HOLDINGS, LTD.
Name of Limited Partnership or Limited Liability Limited Partnership

2. 11/27/02
Date of filing/registration in Florida

3. A02000001571
Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Theodore R. Stotzer, Esq.
Name

c/o 550 S.W. 12th Avenue, Suite 550
Address

Deerfield Beach, Florida 33442
City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

Zena Clarke
Name

6413 Congress Avenue, Suite 110
Florida street address (P.O. Box not acceptable)

Boca Raton FL 33487
City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

NORTH MIAMI BOCA HOLDINGS, Inc.

By: [Signature]
Signature of General Partner's President

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

[Signature]
Signature of Registered Agent

Filing Fee: \$35.00
Certified Copy (optional): \$52.50

11/27/02
m/f:ec