## A0400001551

(Re	questor's Name)	<del></del>		
(Address)				
(Address)				
(Cit	y/State/Zip/Phone			
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



400318696434

09/26/18--01029--007 ++35.00



T. CLINE
OCT-2 2018
EXAMINER

## 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	S/ST. LUCIE PI			
	Name of Limited Partnership or Li	nited Liability L	imited Partners	ship
2S	SEPT. 30, 2004	3	A0400001551 Florida document number	
Date of fil	ing/registration in Florida			
4. The name of the Department of Stat	e registered agent and the registered e:	office address as	s shown on the	records of the Florid
	CORPORATION SE	ERVICE CON	/PANY	ر مر
	Na			· · · · · · · · · · · · · · · · · · ·
	1201 HAYS STREET		i 💆 (	
	Add	ress		4.0
	TALLAHASSEE,	FL. 32301-2	525	**************************************
	City, Stat	e and Zip		<b>""</b> E
5. The name and F	lorida street address of the new reg	istered agent and	Vor office:	
	STEVEN W. DE	UTSCH, ES	Q.	
	Na	me		
	1875 NW CORPO	RATE BLVD.	#100	
	Florida street address (P	.O. Box not acce	ptable)	
	BOCA RATON	l FL	33431	
	City, Stat			
	is/are effective when filed by the F	_	nt of State.	
comply with the pr	appointment as registered agent a ovisions of all statutes relative to the with an accept the obligations of my	e proper and con	mplete perform	
Signature of Regist	tered Agent			
Filing Fee:	\$35.00			
Certified Copy	*			