A0500000476

(Re	questor's Name)			
(Ad	dress)			
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(Cit	y/State/Zip/Phone	#)		
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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/SHINN RUAL	J PROPER I Y	<u>, LID.</u>		
	Name of Limited Partnership or	Limited Liability Lin	nited Partnersh	ip	_
2. N	MARCH 7, 2005	3.	A0500000476 Florida document number		
Date of filing/registration in Florida			Florida docum	ment number	
4. The name of the Department of Sta	e registered agent and the register te:	red office address as	shown on the r	ecords of the	Florida
	CORPORATION	SERVICE COM	PANY		
	1	Name			
	1201 HA	YS STREET			
	A	ddress			
	TALLAHASSE	E, FL. 32301-25	525		
	City, S	tate and Zip			
5. The name and I	Florida street address of the new	registered agent and/	or office:		
	STEVEN W. I	DEUTSCH, ESC	2 .	· • · • · •	ĬŢ.
	1	Name		•	\sim
	1875 NW CORP	ORATE BLVD.	#100	tÞ	
	Florida street address	(P.O. Box not accep	table)		
	BOCA RATO	ON FL	33431	້ຽ <u>.</u> ສ ພ້	91 : 11 AV
	City, S	tate and Zip	<u> </u>		O.
BY: S/Shin	is/are effective when filed by the		of State.		
Signature of Gener	ral Partner				
comply with the pr	e appointment as registered agen ovisions of all statutes relative to with an accept the obligations of	the proper and com	plete perfor <mark>m</mark> a		
Signature of Regis	tered Agent	_			
Filing Fee:	\$35.00				
Certified Copy	(optional): \$52.50				