

A060000000216

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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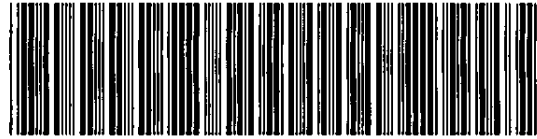
(Business Entity Name)

(Document Number)

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J. BRYAN MAY 25 2006

**COVER LETTER**

**TO:** Registration Section

Division of Corporations

**SUBJECT:** SOUTH FLORIDA PARTNERS 2006, LLLP

(Name of Limited Partnership or Limited Liability Limited Partnership)

**DOCUMENT NUMBER:** A06000000216

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:

**ERIC SIKES**

(Contact Person)

(Firm/Company)

**621 NW 53RD STREET, SUITE 420**

(Address)

**BOCA RATON, FLORIDA 33487**

(City, State and Zip Code)

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For further information concerning this matter, please call:

**ERIC SIKES**

(Name of Contact Person)

at ( **561** ) **886-5576 x622**

(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

INHS04 (01/06)

**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. SOUTH FLORIDA PARTNERS 2006, LLLP

Name of Limited Partnership or Limited Liability Limited Partnership

2. JANUARY 27, 2006

Date of filing/registration in Florida

3. A06000000216

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:

KENNETH S. FEYERS

Name

12082 NW 30TH STREET

Address

CORAL SPRINGS, FL 33065

City, State and Zip

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

ERIC SIKES

Name

621 NW 53RD STREET, SUITE 420

Florida street address (P.O. Box not acceptable)

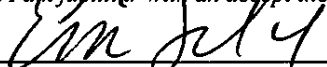
BOCA RATON FL 33487

City, State and Zip

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

  
Signature of General Partner

*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 of Registered Agent

**Filing Fee: \$35.00**

**Certified Copy (optional): \$52.50**

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