A05000000680

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
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COVER LETTER

TO:	Registration Section Division of Corporations							
SUBJ	VECT: Name of Limited Pa	New Founta	ain Plac	ce, Ltd	ed Partnership			
DOC	UMENT NUMBER:		A0900000680					
The e	nclosed Statement of Change care submitted for filing.							
Please	e return all correspondence con	ecerning this n	natter to:					
	Lidia Cartaya			_				
	Contact Person							
	S&K Worldwide Rea	alty LLC						
	Firm/Company			_				
	150 Alhambra Circle,	Suite 725						
	Address			_				
	Coral Gables, Florid	la 33134						
	City, State and Zip C	Code						
	lcartaya@skww	realty.com						
	E-mail address: (to be used for future		tification)		_			
For fu	arther information concerning t	his matter, ple	ease call	:				
	Lidia Cartaya	at (305)	476-0955			
	Name of Contact Person		rea Code :	and Daytii	me Telephone Number			
Enclo	sed is a \$35.00 check made pa	yable to the F	lorida D	epartmei	nt of State.			
STRI	EET ADDRESS:		МАП	LING A	DDRESS:			
Registration Section			Registration Section					
_	ion of Corporations							
	n Building P. O. Box 6327							
	Executive Center Circle		Tallal	nassee, F	L 32314			
Tallal	hassee, 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	New Fountai	n Place, l	_td.		
	Name of Limited Partnership or Lim	ited Liability I	Limited Partnership		
2.	09/22/2009	3.	A0900000 Florida document	0680	
Date of fil	ing/registration in Florida		Florida document	nent number	
4. The name of the Department of Stat	e registered agent and the registered e:	office address	as shown on the reco	ords of the Florida	
	S&K Realty (Group, LLC			
	Nan	າຍ			
	150 Alhambra C	ircle, Suite	800		
	Addr	ess			
	Coral Gables, f	Florida 331	34		
	City, State	and Zip		- 1	
5. The name and F	Florida street address of the new regi	stered agent ar	nd/or office:	17 אבנ 17	
	S&K Worldwide	e Realty, LL	_C	SEP SEP	
	Nan	าย		ASS	
	150 Alhambra Ci	rcle, Suite	725	1±1 −−<	
	Florida street address (P.	O. Box not acc	eptable)	AM 7: OF SI E.FLO	
	Coral Gables	F	լ 33134	:: 05 AI ORIE	
	City, State			V 40	
, 6. Such change(s)	is/are effective when filed by the Flo	orida Departme	ent of State.		
Signature of Gener	Jan YS	·			
comply with the pr	e appointment as registered agent an ovisions of all statutes relative to the with an accept the obligations of my	e proper and co	omplete performance		
Signature of Regis	itan 2 Manager	<u> </u>			
Filing Fee:	\$35.00				

Certified Copy (optional): \$52.50