

A14242

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE
APR 03 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Golden Leaf Apartments, LTD
Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: A 14242

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:

Lisa McKnight
Contact Person

LLK Partners, LLC
Firm/Company

~~13049 E. 2nd Avenue~~ P.O. Box 2260
Address

Tallahassee, FL 32316
City, State and Zip Code

lisa.mcknight21@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lisa McKnight at (850) 893-7650
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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**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. Goldenleaf Apartments, LTD
Name of Limited Partnership or Limited Liability Limited Partnership
2. 3/27/17 Date of filing/registration in Florida
3. A 14242 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:

LLK Partners, LLC
Name

2323 Hansen Ct.
Address

Tallahassee, FL 32301
City, State and Zip

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

LLK Partners, LLC
Name

1349 E. Lafayette St.
Florida street address (P.O. Box not acceptable)

Tallahassee FL 32301
City, State and Zip

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

LLK Partners, LLC
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]
Signature of Registered Agent

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