

A98000000095

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

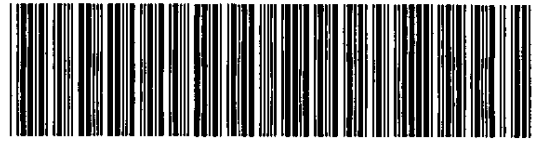
(Business Entity Name)

(Document Number)

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STATE OF TEXAS
SECRETARY OF STATE

OCT 06 2016
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PLACID GARDENS ASSOCIATES, LTD.

Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: A98000000095

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:

BRIAN C. PERLIN, ESQ.

Contact Person

BRIAN C. PERLIN, P.A.

Firm/Company

201 ALHAMBRA CIRCLE, STE. 503

Address

CORAL GABLES, FL 33134

City, State and Zip Code

BRIAN@PERLINSTATEPLANNING.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BRIAN C. PERLIN

Name of Contact Person

at (305)

443-3104
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

BRIAN C. PERLIN, P.A.

Making a difference one family at a time

Brian C. Perlin, Esquire

Florida Bar Certified Specialist, Wills, Trusts & Estates
Florida Bar Certified Specialist, Elder Law
Florida Certified Public Accountant
CERTIFIED FINANCIAL PLANNER™

201 Alhambra Circle, Suite 503, Coral Gables, FL 33134
Phone: 305-443-3104 | Fax: 305-443-0106
brian@perlinestateplanning.com

October 4, 2016

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Cir.
Tallahassee, FL 32301

Re: PLACID GARDENS ASSOCIATES, LTD.

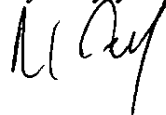
Dear Sir or Madam,

Enclosed please find the following:

- Form for filing Limited Partnership of Limited Liability Limited Partnership Statement on Change of Registered Office or Registered Agent, or both;
- Check number 8019 in the amount of \$35.00 representing the filing fee.

If you have any questions, please don't hesitate to contact my office.

Very truly yours,



Brian C. Perlin

BCP/fr
Enclosures

**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. PLACID GARDENS ASSOCIATES, LTD.
Name of Limited Partnership or Limited Liability Limited Partnership
2. 01/05/1998 Date of filing/registration in Florida
3. A98000000095 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:

GUILLERMO TRONCOSO
Name

16001 WEST TROON CIRCLE
Address

MIAMI LAKES, FL 33014
City, State and Zip

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

BRIAN C. PERLIN, P.A.
Name


201 ALHAMBRA CIRCLE, STE. 503
Florida street address (P.O. Box not acceptable)

CORAL GABLES FL 33134
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 an 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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CLERK OF COURT
DEPARTMENT OF STATE