

B18000000 104

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

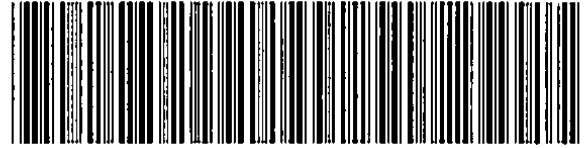
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500331628485

FILED
19 JUL -8 PM 1:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL 18 2008

T SCHROEDER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 13FH Avalon LP
Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: B18000000104

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:

Tim Sanders
Contact Person

13th Floor Investments
Firm/Company

848 Brickell Avenue PH 1
Address

Miami, FL 33131
City, State and Zip Code

tsanders@13fi.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ELISA Seguin at (786) 581-2520
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

**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. 13FH Avalon LP
Name of Limited Partnership or Limited Liability Limited Partnership
2. April 19, 2018 3. B18000000104
Date of filing/registration in Florida Florida document number

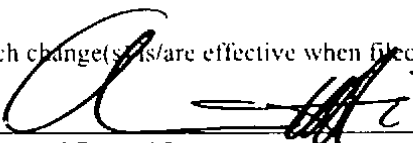
4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Corporation Service Company
Name
1201 Hays Street
Address
Tallahassee, FL 32301-2525
City, State and Zip

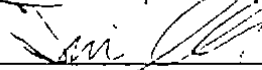
5. The name and Florida street address of the new registered agent and/or office:

Timothy Sanders
Name
848 Brickell Avenue PH1
Florida street address (P.O. Box not acceptable)
Miami FL 33131
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

STANDARD OF STATE
TALLAHASSEE, FLORIDA

19 JUL -8 PM 1:52

FILED