

# B49000000123

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

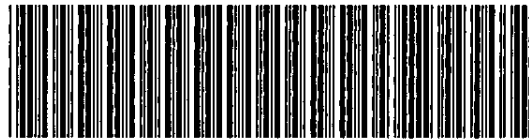
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** The Aeacus Real Estate Limited Partnership  
Name of Limited Partnership or Limited Liability Limited Partnership

**DOCUMENT NUMBER:** B99000000123

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:

Kathy Kuchta

Contact Person

Dharma Group, LC

Firm/Company

14 S. Swinton Avenue

Address

Delray Beach, FL 33444

City, State and Zip Code

kathy@goodwater.com

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

For further information concerning this matter, please call:

Kathy Kuchta

Name of Contact Person

at ( 561 ) 276-0055

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. The Aeacus Real Estate Limited Partnership  
Name of Limited Partnership or Limited Liability Limited Partnership

2. 3/15/1999  
Date of filing/registration in Florida

3. B99000000123  
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:

Sandi Morick

Name

615 S L Street

Address

Lake Worth, FL 33460

City, State and Zip

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

Kathy Kuchta

Name

14 S. Swinton Avenue

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

Delray Beach FL 33444

City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.  
Foristone Developments Limited Company, General Partner

Kimberly Goodyear  
Signature of General Partner By Kimberly Goodyear, Authorized Director

*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.*

Kathy Kuchta  
Signature of Registered Agent

Filing Fee: \$35.00

Certified Copy (optional): \$52.50

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