F10000000569

(Re	equestor's Name)	
(Ad	ldress)	·
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
	<u> </u>	<u> </u>
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
	-	

Office Use Only



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13 JUL 12 PM 2:20

JUL 1 5 2013

T. BROWN

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this tage is submitted for a corporation organized under the laws of the State of OC	
	r to change its registered office or registered agent, or both, in the State of Florida.	
	the corporation: DAVENPORT VILLAGE GENERAL PARTNER LIMITED CORP	
2. The principal	office address: 3250 NE 1st Avenue Ste#316 Miami, FL 33137	
3. The mailing a	ddress (if different):	
4. Date of incorp	poration/qualification: 2/2/2010 Document number: F10000000569	
	street address of the current registered agent and registered office on file with the riment of State: (If resigned, enter resigned)	
	CT Corporation System	
	c/o C T Corporation System, 1200 South Pine Island Road	13 JUL 12
	Plantation, Florida 33324	
6. The name and (if changed):	d street address of the new registered agent (if changed) and for registered office	12 PM
•	C T Corporation System	Ņ
	c/o C T Corporation System, 1200 South Pine Island Road	2
	P.O. Box NOT acceptable	
	Plantation, Florida 33324	
as changed will		agent,
Such change wanthorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	
	James Black, Secretary Printed or types name ista titls	
	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete my dulies, and I am familiar with and accept the obligation of my position as register its document is being filed merely to reflect a change in the registered office address, to that the corporation has been notified in writing of this change.	ed I
By:	poration System Sunan Busa July 11, 2013 passure of Registered Affent Date	
If signing on b	chaif of an entity:	
Con	Typed or Printed Name	
Assista	ant beciding *** filing fee: \$35.00 ***	
N CR2E045 (03/12)	Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314	