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COVER LETTER

Registration Section TO: Division of Corporations FOCUS HOLDINGS, L.L.C. Name of Limited Liability Company Dear Sir or Madam: The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Amy J. Galloway Amy J. Galloway, P.A. Firm/Company 1401 East Broward Blvd., Suite 206 Address Fort Lauderdale, FL 33301 City/State and Zip Code amyjgalloway@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Amy J. Galloway Area Code & Daytime Telephone Number Name of Person STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, Florida 32314 2661 Executive Center Circle Tallahassee, Florida 32301 Enclosed is a check for the following amount: ■ \$25 Filing Fee □ \$55 Filing Fee & Certified Copy

AMY J. GALLOWAY, P.A.

Victoria Park Centre 1401 East Broward Boulevard Suite 206 Fort Lauderdale, FL 33301 Tel. 954.315.4887 Fax 954.762.2554 amyjgalloway@gmail.com

September 4, 2013

Division of Corporations
Registration/Amendment Section
Post Office Box 6327
Tallahassee, FL 32314

Re: Registered Agent/Registered Office Change of Address

Dear Sir/Madam:

Enclosed herewith you will find Check No. 005384, in the amount of \$25.00 payable to The Department of State, Division of Corporations, along with a Change of Address cover letter form for 1st Street Agency, LLC.

You will also find enclosed Check No. 005378, in the amount of \$290.00 payable to the Department of State, and Change of Address cover letter forms for the following:

- 1) BIPT, INC.
- 2) MacNeill Group, Inc.
- 3) Focus Insurance Corp.
- 4) The Focus Foundation, Inc.
- 5) Focus Finance, LLC
- 6) Focus Claim Managers, LLC
- 7) Focus Holdings, LLC
- 8) Focus Insurance Services, LLC
- 9) Focus Technologies, LLC
- 10) Focus Real Estate Development, LLC

Please do not hesitate to contact our office if you have any questions or comments. Thank you.

to Amy J. Galloway, P.A.

Enclosures

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Focus Holdings.	, L.L.C		
2. (a) Principal office address of limited liability com	nnany: 1300 Saworass Corporate Parkway		
(Note: MUST BE STREET ADDRESS)	Suite 300		
(11000 11001 11001 11001)	Sunrise, FL 33323-2804		
(b) Mailing address of limited liability company:	1300 Sawgrass Corporate Parkway		
(Note: MAY BE POST OFFICE BOX)	Surise 300 Surrise, FL 33323-2804	<u></u>	
	Summse, FL 33323-2004		
07/31/2000	L00000009054		
3. Date of filing/registration in Florida	4. Document number		
5. Date of ming/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shows	n on the records of the Florida Dept.	of State:	
Registered Agent:	Amy J. Galloway		
	3	ದ	
Registered Office Address:	110 SE 6th Street		
	15th Floor Fort Lauderdale, FL 33301	Sp11	
	POIL Eavide I date, P.E. 33301		
	SHE SHE	اللا ف	
(b) Enter name of NEW Registered Agent and/or	NEW Registered Office addfess:	全口	
NIESSI Designation of America	Amy J. Galloway	= -	
NEW Registered Agent:	Arry J. Galloway		
NEW Registered Office Address:	1401 East Broward Boulevard	57	
(MUST BE FLORIDA STREET ADDRESS)	Suite 206		
		FL 33301	
If the limited liability company is not organized under confirmed that after the change or changes are made, to and the business office of the registered agent will be liability company, it is hereby confirmed that the chan the members of the limited liability company or as of the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	the Florida street address of the regist identical. Or, in the case of a Florida nge(s) was/were authorized by an affin herwise provided in the articles of org	tered office a limited rmative vote of	
Konald lerzer			
Printed or typed name of signee			
I hereby accept the appointment as registered agent of comply with the provisions of all statutes relative to and I am familiar with and accept the obligations of a Chapter 608, F.S. Or, if this document is being filed address, I hereby confirm that the limited liability confirms the limited liability confirms that the limited liability confirms the limited liability confirms that the limited liability confirms the limited liability confirms that the limited liability confirms the liability confirms	and agree to act in this capacity. I fu he proper and complete performance ny position as registered agent as pro to merely reflect a change in the regi npany has been notified in writing of	orther agree to of my duties, ovided for in stered office this change.	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent