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ONE BISCAYNE TOWER - 34" FLOOR 2 SOUTH BISCAYNE BOULEVARO MIAMI, FLORIDA 33131

EVAN R. MARKS

CARDLYN W. WEST

TELEPHONE: (305) 374-0210
FAX: (305) 374-4089
EMAIL: INFO@MARKBANOWEBT.COM

CYRIL A. MODDY SYDNEY A. TOWNE

December 10, 2018

**VIA OVERNIGHT MAIL** 

## DIVISION OF CORPORATIONS

Amendment Section Clifton Building 2661 Executive Center Circle Tallahassee, FL. 32301

**RE:** THE COLLECTION, LLC.

Registered Agent Information - Division of Corporations

Dear Sir or Madam:

Attached please see the form "Cover Letter" and "Statement of Change of Registered-Office or Registered Agent or Both for Limited Liability Company" which has been fully executed. Also, attached please see my Law Firm's check number 9889 in the amount of Twenty Five Dollars (\$25.00)

Very truly yours,

MARKS & WEST, P.A.

EVAN R. MARKS, ESQ

ERM/mrv Enclosures

## COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: 1/10 (1010 (1107)   Name of Limi	ted Liability Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Chang	a and faute) are submitted for filing			
Please return all correspondence concerning this matter t	o the following:			
(_Var)   Matte, Name of Person				
Firm/Company				
A STRUCTURE PORT OFFICE Address	s. (139)	•	2018	<b>T</b>
City/State and Zip Code			  >	:
E-mail address: (to be used for future annual report notification)		٠.	2: 52	-44.00
For further information concerning this matter, please ca	11:			
Mine of Person at ( )	Area Code & Daytime Telephon	e Numbe	r	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check for the following amount:				
☐ \$25 Filing Fee	S55 Filing Fee & Certified Copy			

INHS18 (2/14)

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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: The Coll	iction.	LLC	
2. (a) 200 Bird Road	_ (b)		
Principal office address of limited liability company:		Mailing address of limite	d liability company:
(Note: MUST BE STREET ADDRESS)		(Note: MAY BE POS	
Coral Gables, Fi 33146			
8/25/2000	<u> Lo</u>	00000 10251	
3. Date of filing/registration in Florida	4.	Document number	
5. (a) Evank Marks			
Registered Agent and Registered Office shown on the records of the	ne Florida Dept. of S	tate:	
International Place			
Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)	<del></del>	
100 SE and Street, Suite	2700	÷.	2018
1	33131	<del></del>	- 11
	27(71		
(b) Evan & Marks			
Enter name of NEW Registered Agent and/or NEW Registered (	Office address:	<del></del>	7
O a Para a Dilago			<u>,</u>
One Biscaure 10 wer	··	<del></del>	5 <b>2</b>
NEW Registered Office Address:		_	
2 South Biscayne Boulevar	21, 34-1/h	<u>1</u> 1001	
MIGMI	ス み こうこし		
, F1	ろろっつし		
If the limited liability company is not organized under the law	s of the State of I	Florida, it is hereby cor	nfirmed that after
<ul> <li>the change or changes are made, the Florida street address of t</li> </ul>	he registered offi	ice and the business of	fice of the registered
agent will be identical. Or, in the case of a Florida limited lial was/were authorized by an affirmative vote of the members of	`the limited liabil	lity company or as othe	hat the change(s) erwise provided in
the articles of organization or the operating agreement of the I	imited liability co	ompany.	,
	<u>Kenneth T</u>	. Gorin, President	
Sign rate of a member of authorized representative of a member		Printed or typed name of	•
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p	re to act in this co rerformance of m	ipacity. I further agree y duties, and Lam Jam	e to comply with the iliar with and accept
provisions of all statutes relative to the proper and complete the obligations of my position as registered agent as provided to merely reflect a change in the registered office address, I have the potified in writing of this change.	for in Chapter 6 ereby confirm the	05, F.S. Or, if this doc it the limited liability c	ument is being filed company has been
nonnea in writing by this change.			
Signature of Registered Agent			
Division of Corporations P.O. Bo	ox 6327 <b>a</b> Tallah	98800 FL 37314	
FILING FE		uman (	
15H5TS (2/14)			