

L00000015053

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Terrace at Bay Point
LLC

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

- ___ Art of Inc. File
- ___ LTD Partnership File
- ___ Foreign Corp. File
- ___ L.C. File
- ___ Fictitious Name File
- ___ Trade/Service Mark
- ___ Merger File
- ☒ Art. of Amend. File
- ___ RA Resignation
- ___ Dissolution / Withdrawal
- ___ Annual Report / Reinstatement
- ___ Cert. Copy
- ___ Photo Copy
- ___ Certificate of Good Standing
- ___ Certificate of Status
- ___ Certificate of Fictitious Name
- ___ Corp Record Search
- ___ Officer Search
- ___ Fictitious Search
- ___ Fictitious Owner Search
- ___ Vehicle Search
- ___ Driving Record
- ___ UCC 1 or 3 File
- ___ UCC 11 Search
- ___ UCC 11 Retrieval

Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up

**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. The name of the limited liability company is: TERRACE AT BAY POINTE LLC
2. The mailing address of the limited liability company is: C/O BLAUO TACKABEN COMAS,
PO DRAWN 25008, WINSTON-SALEM, NC 27114-5008

3. Date of filing/registration in Florida 12/6/2000
4. Document number L00000015053

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


CAPITAL CONNECTION, INC
Name
417 E. VIRGINIA ST, STE 1
Address
TALLAHASSEE, FL 32301-1283
City, State and Zip

6. The name and address of the new registered agent and/or office:

CAPITAL CONNECTION, INC
Name
417 E. VIRGINIA ST, STE 1
Florida street address (P.O. Box NOT acceptable)
TALLAHASSEE FL 32301-1283
City, State and Zip

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.


(Signature of a member or authorized representative of a member)

Dr. G. A. J. H.
(Printed or typed name of signer)

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 as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Sulani White
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314