L01000001432

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP	WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
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2015 DEC 21 A & I



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 3, 2015

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BENJAMIN COHEN 3515 N. 30TH TERRACE HOLLYWOOD, FL 33021

SUBJECT: HOLLYWOOD-HARRISON DEVELOPMENT, L.L.C.

Ref. Number: L01000001632

We have received your document for HOLLYWOOD-HARRISON DEVELOPMENT, L.L.C. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a LIMTED PARTNERSHIP - LP, but your entity is a LIMITED LIABILITY COMPANY - LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Mason Regulatory Specialist II

Letter Number: 015A00025371

COVER LETTER

		· · · · ·	COVE	KLETTEK	A.T.	's 3°4~
TO:	Reg	istration Section			ا السائل	EIVED
	_	sion of Corporations			PEC 15 DEC 21	PH 2
SUBJ	ECT:	HOLLYWOOD-HARRISON	DEVELO	PMENT, L.L.C.	TALLATASE	Z: 25 QF STATE STORING
		Nam	e of Limite	d Liability Company		TO LUNGON
Dear S	Sir or I	Madam:				
The er	nclose	d Registered Agent/Registered Offi	ce Change	and fee(s) are submitt	ed for filing.	
Please	returi	all correspondence concerning thi	s matter to	the following:		
BEN	JAMI	N COHEN				
		Name of Person				
HOL	LYW	OOD-HARRISON DEVELOPI	MENT, L.i	L.C.		
		Firm/Company				
3515	N. 3	0TH TERRACE				
		Address				
HOL	LYW	OOD, FL 33021				
		City/State and Zip Code				
OLG	FOR	@GMAIL.COM				
	E-mail	address: (to be used for future ann	ual report n	otification)		
For fu	rther i	nformation concerning this matter,	please call:			
BEN	JAMI	N COHEN	954 at (325-2887		
		Name of Person		Area Code & D	aytime Telephon	e Number
	STF	REET/COURIER ADDRESS:		MAILING ADDRE	SS:	
	Reg	istration Section		Registration Section		
		ision of Corporations		Division of Corporat	ions	
		ton Building		P.O. Box 6327		
		1 Executive Center Circle		Tallahassee, Florida	32314	
	Tall	ahassee, Florida 32301				

☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

Enclosed is a check for the following amount:

□ \$25 Filing Fee - See ATTACLOO

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. 1	1. Name of the limited liability company: HOLLYWOOD-HARRISON DEVELOPMENT, L.L.C.						
2. (a)	A	o)				
(-	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	3515 N. 30TH TERRACE		3515 N. 3	30TH TERRACE			
	HOLLYWOOD, FL 33021		HOLLYW	/OOD, FL 33021			
	01/31/2001		L0100000	1632			
3.	Date of filing/registration in Florida	4.		Document number			
5. (8	, ANGRESS, MINDY						
J. (c	Registered Agent and Registered Office shown on the records of	the Florid	a Dept. of State:				
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRES:	<u> </u>				
	1925 HARRISON STREET						
	HOLLYWOOD ,FL	33020		2015 DEC SECRETA	-T 1		
(b	RON COHEN			EC 21 ETARY HASSE			
	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dress:		П		
	3515 N 30TH TERRACE			A 9: 17 OF STATE	D		
	NEW Registered Office Address:			A MO	÷		
	HOLLYWOOD , FL	33021					
the ci agent was/v	limited liability company is not organized under the landange or charges are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	f the reginability confithe line limited	stered office ompany, it is nited liability	and the business office of hereby confirmed that the company or as otherwise pany.	of the registered ne change(s)		
Γ	nature of a member or authorized representative of a member			Printed or typed name of sign			
	weby accept the appointment as registered agent and agents of all statutes relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address, I sed in writing of this change. Multiply the change of the registered office address of the change	ree to ac perform d for in hereby c	t in this capa ance of my d Chapter 605, onfirm that t	city. I further agree to c luties, and I am familiar F.S. Or, if this documer he limited liability compo	omply with the with and accept at is being filed any has been		