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COVER LETTER

•	COVER L	ETTER	
TO: Registration Section Division of Corporations		Por Constitution of the Co	
Schwartz Charlotte Properti SUBJECT:	es, L.L.C.	(1
	Name of Limited L	iability Company	64 S.
Dear Sir or Madam:			1.87
The enclosed Registered Agent/Register	ered Office Change and	fee(s) are submitted for filing.	
Please return all correspondence conce	rning this matter to the	following:	
Eugene Schwartz			
Name of Perso	on	_	
Executive House Apartments			
Firm/Compan	ý	_	
1000 N. Lockwood Ridge Road			
Address			
Sarasota, FL 34237			
City/State and Zip	Code	_	
gsexpt@aol.com			
E-mail address: (to be used for fu	ture annual report notif	ication)	
For further information concerning this	matter, please call:		
Mary Fallon	941 at (366-5229	
Name of Person		Area Code & Daytime Telephone Number	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enclosed is a check for the fo	llowing amount:		
■ \$25 Filing Fee	□ s:	55 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.

l Name	c of the limited liability company:	otte Proper	ties, L.L.C.		,
			b)		l
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	\	N	failing address of limited liability cor (Note: MAY BE POST OFFICE B	npany:
1	000 N. Lockwood Ridge Road		1000 N. Lo	ckwood Ridge Road	<u> </u>
S	Sarasota, FL 34237		Sarasota, F	L 34237	<u> </u>
03	3/23/2001		L010000044	67	I
3.	Date of filing/registration in Florida	4.		Document number	
	5 6				
	egistered Agent and Registered Office shown on the records an W. Pitchford	of the Flori	da Dept. of State		1
R	Registered Office Address (MUST BE FLORIDA STREE	ET ADDRE.	<u>SS)</u>	20	ا را ا
2	240 S. Pincapple Ave., 8th Floor			-	
5	Sarasota,	FI 34236		·	
	inter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u> Andrew W. Rosin, P.A.	red Office	nddress:	-	24.1 Kg 41.40
1	NEW Registered Office Address:	<u></u>	<u> </u>	-	
1	1966 Hillview Street		· -	-	1
	Sarasotu	FL	3607	-	:
change of agent with was/were	nited liability company is not organized under the or changes are made, the Florida street address of II be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the member of organization or the operating surrecment of the control of the contro	the registed liability of the limited the limited	ered office an company, it is imited liabilit	d the business office of the reg s hereby confirmed that the cha y company or as otherwise pro apany.	iștereu inge(s)
_	re of a member or authorized representative of a member			Printed or typed name of signee	
provision the oblig to merel	y accept the appointment as registered agent and instantial statutes relative to the proper and complications of my position as registered agent as provey reflect a change in the registered office address in writing of this change.	ete perjor	Chapter 60	FS Or if this document is l	eine filed
C:	of Registered Agent				1
guinire	Division of Cornerations P	O. P: 41	774 Tallaba	cena FI 37314	Į.