

L01000005580

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

(Business Entity Name)

(Document Number)

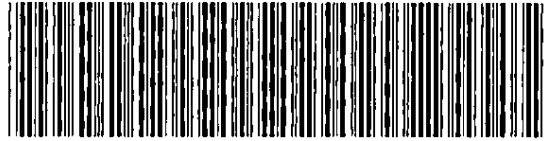
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

100

SUBJECT: 1031 Reverse Exchange Company, LLC

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Whitney Pope

Firm/Company

Address

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

Whitney Pope

3334450

at (_____)

Area Code & Daytime Telephone Number

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

📄 \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**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: 1031 Reverse Exchange Company, LLC
2. (a) 1031 Reverse Exchange Company, LLC (b) 1031 Reverse Exchange Company, LLC
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
15671 San Carlos Blvd., Ste. 101 15671 San Carlos Blvd., Ste. 101
Fort Myers, FL 33908 Fort Myers, FL 33908
3. 04/09/2001 4. L01000005580
Date of filing/registration in Florida Document number
5. (a) Island Financial Services, Inc.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Island Financial Services, Inc.
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
15671 San Carlos Blvd., Ste. 101
Fort Myers, FL 33908
- (b) _____
Enter name of NEW Registered Agent and/or NEW Registered Office address:
Corporation Service Company
NEW Registered Office Address:
1201 Hays Street
Tallahassee, FL 32301

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SECRETARY OF STATE
TALLAHASSEE, FL

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.

Elizabeth A. Jerdonek
Signature of a member or authorized representative of a member

Elizabeth Jerdonek
Printed or typed name of signee

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 605, 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.

Elizabeth A. Jerdonek
Signature of Registered Agent