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

FILED ...

liability company submits the following statement in order to change its registered affice or registered agent, or both, in the State of Florida.
1. The name of the limited liability company is: MOTEK LANE APTSURVIANT OF STATE TALKAHASSEE, FLORIE  7. The mailing address of the limited liability company is: 1810/ MISTIG. OF AR
2. The mailing address of the limited liability company is: 19101 MVSTIC PT DR
#2808 AVENTURA, FL 33180
8/06/200/20/000/298/3. Date of filing/registration in Florida4. Document number
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
SPIFGEL + UTRERA, P.A.
SPIFGIEL + UTRERA, P.A.  Name  1840 5 W 22 nd St. 4th floor  Address
MIAMI, FL 33145 City, State and Zip
6. The name and address of the new registered agent and/or office:
HILLEL BRONSTEIN
Name, 1955 NE 164 <sup>th</sup> St
Florida street address (P.O. Box NOT acceptable)
N. MIAMI BEACH, FL 33162 City, State and Zip
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)
(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

Thereby accept the dippointment as registered agent and agree to do! 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 he change in that the limited liability company has been notified in writing of this change.

(Signature of Registered Agent)

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

**FILING FEE: \$25.00** 

INHS18(10/99)