

Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850)617-6380

Account Name : BERGER SINGERMAN - FORT LAUDERDALE

Account Number : 120020000154

Phone : (954)525-9900

Fax Number

: (954)523-2872

## REGISTERED AGENT CHANGE

## BANKATLANTIC VENTURE PARTNERS 5, LLC

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## HOLDDOG STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR

BOTH FOR LIMITED	LIABILITY COMPANY
Pursuant to the provisions of sections 608.416 or liability company submits the following statement agent, or both, in the State of Florida.	r 608.508, Florida Statutes, the understancd limited in order to change its registered office or registered
1. The name of the limited liability company is: B	ankAtlantic Venture Partners 5, LLC
2. The mailing address of the limited liability comp	pany is: 2200 West Cypress Creek Road
Ft. Lauderdale, FL 33309	
December 18, 2001	L01000021953
3. Date of filing/registration in Florida	4. Document number
5. The name of the registered agent and the register Florida Department of State:  CT Corporation Sy	
1200 South Pine Isla	
	and Road  iddress  4  Plea and Zip
Plantation, Ft. 3332	ate and Zip
6. The name and address of the new registered ager	
BSPA Corporate Se	ervices, inc.
Mar	

FL 33301 Ft. Lauderdale 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.

Florida street address (P.O. Box NOT acceptable)

350 E. Las Olas Blvd., Sulte 1000

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

SEITH WASE (Printed or typed name of signes)

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 olds, F.S. Or, if this accument is deing 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.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 **FILING FEE: \$25.00** 

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