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K.SALY EXAMINER AUG 28 2013

COVER LETTER

TO: Registration Section	
Division of Corporations	
TAL EL	0 16.14 110
SUBJECT: EM Florida	Keul Estate, LCC imited Liability Company
Name of Er	anned Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Of	fice Change and fee(s) are submitted for filing
Please return all correspondence concerning the	his matter to the following:
Thease return an correspondence concerning in	his matter to the following.
< 11 T.	
Sonya Keyser, Truster	<u> </u>
Name of Person	,
4	
EM Florida Real Estate	LILC
Firm/Company	
	•
· 3801 S. Ocean DR. #	10-0
Address	
11 11 1 1 1 2 - 16	
Hollywood TL 33015 City/State and Zip Code	1
Chy/State and Zip Code	
E-mail address: (to be used for future annual report not	lification)
·	, and the second
For further information concerning this matter	, please call:
Xon (VA.c.)	at (212) 227-3930
Name of Herson	Area Code & Daytime Telephone Number
<i>,</i> , , , , , , , , , , , , , , , , , ,	
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	. allandovey a torina one a l
Enclosed is a check for the following	amount.
	, amount.
🗹 \$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 608.416 or 608.508, 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.

agoin, or com, in the state of 1 to that.	•	
1. Name of the limited liability company: <u>EM Fla</u>	ovida Real Estate, LLC	
2. (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	ny: 3POI South Ocean Dr. # 12-0 Hollywood, FL 33019	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	P.O. Box 1917 Hallandale, FL 33019	
07-08-2002 3. Date of filing/registration in Florida	-020434044 ¥ 2020001704	
5. (a) Registered Agent and Registered Office shown o	n the records of the Florida Dept. of State:	
Registered Agent:	Emil Makovetsky	
Registered Office Address:	3801 S. Ocean DRE 12-0 1	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NI</u> <u>NEW Registered Agent</u> :	EW Registered Office address: Sonya Keyser, Trustee	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	3801 S. Ocean DR. #12-0 Hollywood ,FL 33019	
f the limited liability company is not organized under the onfirmed that after the change or changes are made, the nd the business office of the registered agent will be ide lability company, it is hereby confirmed that the change the members of the limited liability company or as otherwhe operating agreement of the limited liability company.	e laws of the State of Florida, it is hereby Florida street address of the registered office ntical. Or, in the case of a Florida limited	
Sonva Keyser Trustre.		
Sonya Keyser, Trustec	_	
hereby accept the appointment as registered agent and omply with the provisions of all statutes relative to the pnd I am familiar with and accept the obligations of my play the color, if this document is being filed to madees, I hereby donlish that the limited liability compa	agree to act in this capacity. I further agree to roper and complete performance of my duties, socialism as registered agent as provided for inserely reflect a change in the registered office my has been notified in writing of this change.	
ignature of Registered Agent Sonya Key.	ser, Trustee	
Division of Corporations, P.O. Box 6	327, Tallahassee, FL 32314	
FILING FEE: \$25.00		