100000011311

(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(Cit	ty/State/Zip/Phone #))	
PICK-UP	MAIT	MAIL	
(Bu	isiness Entity Name)		
(Document Number)			
Certified Copies	Certificates of	Status	
Special Instructions to Filing Officer:			

Office Use Only



600251480286

09/12/13---01017---010 **25.00

13 SFP 12 PM 5: 55

SEP 1 6 2013 3. BUTLER

COVER LETTER

	ation Section n of Corporations			
SUBJECT: _		DEVELOPHENT LLC		
	Name	of Limited Liability Company		
Dear Sir or Ma	ndam:			
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
_				
KICH	ARD STEAD	>		
	Name of Person			
TREASO	ores beveloph	ENT LLC SEP 12	IALL	
,	Firm/Company		7.7	
		-2	و ب	
303	5 NE 208	STREET	- (
	Address	స		
		ණ ජ	1	
AVENTURA, FLORIDA 33180				
City/State and Zip Code				
RICHARD a) TREASURESDEVELOPHENT. COM E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
RICH	IARD STEAD	at (305) 937-0427		
	Name of Person	Area Code & Daytime Telephone Number		
STREE	ET/COURIER ADDRESS:	MAILING ADDRESS:		
	Registration Section Registration Section			
	Division of Corporations Division of Corporations			
	Clifton Building P.O. Box 6327			
	xecutive Center Circle ssee, Florida 32301	Tallahassee, Florida 32314		

☐ \$55 Filing Fee & Certified Copy

🔊 \$25 Filing Fee

Enclosed is a check for the following amount:

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.

1. Name of the limited liability company: TREASUR	les development LLC	
2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	3035 DE 208 STREET AVENTURA FLORIDA 33180	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	3035 NE 208 STREET AVENTURA, FLORIDA 33180	
7/10/2062 3. Date of filing/registration in Florida 4	L02000017297	
3. Date of filing/registration in Florida 4	. Document number	
5. (a) Registered Agent and Registered Office shown on the	ne records of the Florida Dept. of State:	
Registered Agent:	RICHARD STEAD	
Registered Office Address:	1981 NE 196 TERRACE HIAMI, FLORIDA 33179	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> <u>NEW</u> Registered Agent:	Registered Office address: RICHARD STEAD	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	3035 NE 208 STREET AVENTURA ,FL 33/188	
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 water the members of the limited liability company or as otherwise provided in the articles of organization of the operating agreement of the limited liability company.		
RICHARD STEAD Printed or typed name of signee		
I hereby accept the appointment as registered agent and ag comply with the provisions of all statutes relative to the pro- and I am familiar with and accept the obligations of my pos Chapter 608, F.S. Or, if this document is being filed to mer- address, I hereby confirm that the limited liability company	ree to act in this capacity. I further agree to per and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office 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