

L03 000000 8015

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

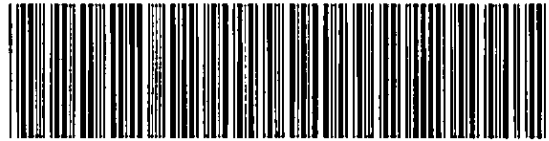
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2020 MAR 13 AM 9:13

R. WHITE

MAR 13 2020

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: 6800 Broken Sound LLC
Name of Corporation

DOCUMENT NUMBER: L03000008015

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Marc Bell

Name of Contact Person

Firm/Company

6800 Broken Sound Parkway NW, Suite 200

Address

Boca Raton, FL 33487

City/State and Zip Code

mbell@marcbell.com

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

For further information concerning this matter, please call:

Marc Bell

Name of Contact Person

at (561) 988-1701

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

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

Street Address:

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2020 MAY 13 AM 10:25

March 30, 2020

MARC BELL
6800 BROKEN SOUND PKWY NW STE 200
BOCA RATON, FL 33487

SUBJECT: 6800 BROKEN SOUND LLC
Ref. Number: L03000008015

We have received your document for 6800 BROKEN SOUND LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White
Regulatory Specialist II Supervisor

Letter Number: 020A00006879

**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: 6800 Broken Sound LLC
2. (a) 6800 Broken Sound Pkwy NW
Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)
Suite 200
Boca Raton FL 33487
31512003
- (b) 6800 Broken Sound Pkwy NW
Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)
Suite 200
Boca Raton FL 33487
LD3000008015
3. Date of filing/registration in Florida 4. Document number

5. (a) Jo-Jean Figueira, Esq.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

6800 Broken Sound Pkwy NW
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Suite 200
Boca Raton FL 33487

- (b) Marc Bell
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

6800 Broken Sound Pkwy NW
NEW Registered Office Address:
Suite 200
Boca Raton FL 33487

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]
Signature of a member or authorized representative of a member

Marc Bell - Manager
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.

[Signature]
Signature of Registered Agent

2020 JUN 13 PM 9:13