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## The Business Company.com

То:		endme sion o		ction coration	ns Fax	:			TO SA
From:	Mic	hael E	. Zealy	y, Sr.	Dat	<b>e</b> ;	Septem	ber 3, 200	4 3
Re:		Grand Palms Resort, LLC Doc.# L03000052900					÷	,	25.000 J
CC:		<u> </u>	· · · · · · · · · · · · · · · · · · ·	·	<u> </u>		··		900
□ Unge	nt	□ For R	eview	☐ Pleas	a Comm	ent	☐ Please Re	ply 🗆 Pleas	e Recycle
•	·	•	•		•	•	•	•	•

- (1) Statement of Change of Registered Office Or Registered Agent or Both for Limited Liability Company.
- (2) Resignation of Authorized Representative.

Together with a check in the amount of \$50.00 for filing fees in the matter.

Please address all correspondence to the writer at the above referenced address. You may contact me by telephone at 954.817.3016.

Thank you.

Michael E. Zealy, Sr.



## 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. The name of the limi	ted liability company is	Grand	Palms Resort, LLC			
2. The mailing address	i i i i i i i i i i i i i i i i i i i	1 700.0	. 110 Grand Palms	Drive		
Pembroke Pines, Flo		arufana) an				
12/15/03		_	L03000052900			
3. Date of filing/registra	ation in Florida	4. Document number				
5. The name of the regis Florida Department o	stered agent and the regi f State: Drake M. Batcheld		ce address as shown on	the records of the		
	350 East Las Olas	Name Blvd, Su Address	ite 1600	ـــــــــــــــــــــــــــــــــــــ		
	2004 SEP 23 PM 3:59 2004 SEP 23 PM 3:59 2019 OF CORPORATIONS 2019 OF CORPORATIONS					
6. The name and addres	-	, State and agent and	•	THASSIAN P		
	Sal Steven Sciann	na		15 15 15 15 15 15 15 15 15 15 15 15 15 1		
	110 Grand Palms	Name Drive		160 159 100 159		
			ox NOT acceptable)	マチ		
	Pembroke Pines	FL	33027			
	City,	State and	Zip			
Signature of a member or audi	change or changes are a	made, the vill be iden ie change( f as otherw company.	Florida street address outical. Or, in the case o	orida, it is hereby f the registered office f a Florida limited by an affirmative vote of cles of organization or		
Sal Steven Scianna (Printed or typed name of sign.)	98)					
I hereby accept the app comply with the provisi and I am familiar with a Chapter 608, F.S. Or address, I hereby confii	pointment as registered ons of all statutes relati and accept the obligation of this document is being m that the limited liabil	agent and ve to the p vns of my p g filed to n lity compa	agree to act in this cap roper and complete per osition as registered a verely reflect a change ny has been notified in	acity. I further agree to formance of my duties, gent as provided for in the registered office writing of this change.		
ZiSignature of Registered Agent	<b>t)</b>	D O Dag 4	(227 Tallahassas EV	22214		
·_ DIVI	sion of Corporations, I	COCOLOUX (	ija i, triihnassee, kl	J4J14		

**FILING FEE: \$25.00** 

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