## L04 000 031883

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## **COVER LETTER**

TO: Registration Section Division of Corpora			
SUBJECT: MAJ	ESTIC RESIDENCES I, LLC Name of Limited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Scott W	Leeds me of Person		
	RESIDENCES ILLC m/Company		
6410 Hola			
City/S	west Ranches, FL. 33330 City/State and Zip Code		
Sweeds @ Aol. Com  E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Scott W. Lee Name of P	erson at (305) 962-1236 Area Code & Daytime Telephone Number		
Mailing Address Registration Sect Division of Corpo P.O. Box 6327 Tallahassee, FL 3	on Registration Section  Division of Corporations  The Centre of Tallahassee		
Enclosed is a check for the following amount:			
□ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy		

INHS18 (2/14)

## 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.

Name of the limited li	liability company: MAJESTIC RESTOE	NCES I , LLC
	DATEE TRAIL (b) SAME	
Principal office (Note: 3	must be street address of limited liability company:  Must be street address)  (Note: A	dress of limited liability company:  MAY BE POST OFFICE BOX)
Southw	vest Ranches, FL	
	33330	
04/3	27/2004 L0400	0031883
3. Date of fi	iling/registration in Florida 4. Docume	nt number
$5. (a) _{5.}(a)$	H W, Leeds	
Registered Agent and	Registered Office shown on the records of the Florida Dept. of State:	
811 5	SE 5" Ave	
Registered Office Add	kires (MUST BE FLORIDA STREET ADDRESS)	2023 M. J.
		<b>[</b>
Pompano	Beach FL 33060	3
(b) Scot	T W. Leeds	
Enter name of NEW I	Registered Agent and/or NEW Registered Office address:	
6410	HOLATEE TRAIL	7
NEW Registered Offi	fice Address:	
Southwes	st Ranches FL 33330	
change or changes are ma agent will be identical. O was/were authorized by a	mpany is not organized under the laws of the State of Florida, it is ade the Florida street address of the registered office and the bus or, in the case of a Florida limited liability company, it is hereby in affirmative vote of the members of the limited liability company on the operating agreement of the limited liability company.	confirmed that the change(s) ny or as otherwise provided in
	Scott W.	Leeds
_	thodized representative of a member Printed o	r typed name of signee
I hereby accept the apportunitions of all statutes in the obligations of my posito merely reflect a change notified in writing of this control of the contro	vintment as registered agent and agree to act in this capacity. If relative to the proper and complete performance of my duties, as ition as registered agent as provided for in Chapter 605, F.S. Oe in the registered office address, I hereby confirm that the limite change.	urther agree to comply with the nd I am familiar with and accept ir, if this document is being filed ed liability company has been

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

Signature of Registered Agent