## LO4000062606

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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 731209 7392947

AUTHORIZATION : Spelle line

COST LIMIT : \$ \$5.00

ORDER DATE : April 18, 2019

ORDER TIME : 11:39 AM

ORDER NO. : 731209-015

CUSTOMER NO: 7392947

## CHANGE OF AGENT

NAME: HALLANDALE TRUST, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Lydia Cohen -- EXT# 62974

EXAMINER:

2019 APR 18 AM 8:

## 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. N	ame of the limited liability company: Hallandale Trus	t, LLC		·
2. (a)		(b)		
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0)	Mailing address of limited liabil (Note: MAY BE POST OFF	
	8226 Mount Thor Lane	<del></del>	8226 Mount Thor Lane	
	Boynton Beach, FL 33473	_	Boynton Beach, FL 33473	
	08/24/2004		L04000062606	
3.	Date of filing/registration in Florida	4.	Document number	<u>-</u>
5. (a)	Barry H. Swickle			
``	Registered Agent and Registered Office shown on the records of the	he Florida	Dept. of State:	2019 N
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)		APR T
	8226 Mount Thor Lane			18 E. H. S.
	Boynton Beach , FL	33473		AH 8:
(b)	Corporation Service Company  Enter name of NEW Registered Agent and/or NEW Registered (	Office add	ress:	26
	1201 Hays Street			
	NEW Registered Office Address:		<del></del>	
	Tallahassee, FL_	32301		
he cha agent v was/we	imited liability company is not organized under the law inge or changes are made, the Florida street address of t vill be identical. Or, in the case of a Florida limited lial ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	the regist bility cor the limitimited limited	ered office and the business office of npany, it is hereby confirmed that the ted liability company or as otherwise	the registered
Signa	ture of a member or authorized representative of a member	0.010	Printed or typed name of signer	
he obl o mere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflecy a change in the registered office address, I ha I in writing of this change.	e to act i performa for in Ci ereby coi	in this capacity. I further agree to conce of my duties, and I am familiar whapter 605, F.S. Or, if this document afirm that the limited liability compains	 mply with the ith and accept is being filed ny has been 
27	of Registered Agent C	D.Y.	Lydia Cohen	
aignatu	re of Registered Agent Corporation Service Company	BY:	Asst. Vice President	

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