## 104000065015

| (Requestor's Name)                      |  |  |  |  |  |
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| PICK-UP WAIT MAIL                       |  |  |  |  |  |
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| (Business Entity Name)                  |  |  |  |  |  |
| (Dusiness Littly Name)                  |  |  |  |  |  |
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| (Document Number)                       |  |  |  |  |  |
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## **COVER LETTER**

| TO:  | Registration Section Division of Corporations  |                        |   |  |  |  |  |
|--|--|------------------------|---|--|--|--|--|
| SUBJI  | Biscayne Housing Group, LLC  |                        |   |  |  |  |  |
|  | Name of Limited Liability Company  |                        |   |  |  |  |  |
| Dear S   | ir or Madam:   |                        |   |  |  |  |  |
| The en   | closed Registered Agent/Registered Offi  | ce Change and fe       | ee(s) are submitted for filing.                                       |  |  |  |  |
| Please   | return all correspondence concerning thi   | s matter to the fo     | llowing:  |  |  |  |  |
| Joel L   | L. Tabas   |                        |   |  |  |  |  |
|  | Name of Person   |                        | -   |  |  |  |  |
| Tabas & Soloff, P.A.   |  |                        |   |  |  |  |  |
|  | Firm/Company   |                        | -   |  |  |  |  |
| 25 SE  | E 2nd Avenue, Suite 248  |                        |   |  |  |  |  |
|  | Address  |                        | -   |  |  |  |  |
| Miam   | ni, Florida 33131  |                        |   |  |  |  |  |
|  | City/State and Zip Code  |                        | -   |  |  |  |  |
| jtabas   | s@tabassoloff.com  |                        |   |  |  |  |  |
| E-mail address: (to be used for future annual report notification) |  |                        |   |  |  |  |  |
| For fur  | rther information concerning this matter,  | please call:           |   |  |  |  |  |
| Joel L   | L. Tabas   | 305                    | 375-8171  |  |  |  |  |
|  | Name of Person   |                        | Area Code & Daytime Telephone Number                                  |  |  |  |  |
|  | STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 | Regi:<br>Divis<br>P.O. | stration Section sion of Corporations Box 6327 shassee, Florida 32314 |  |  |  |  |
| Enclosed is a check for the following amount:                      |  |                        |   |  |  |  |  |
|  | ☑ \$25 Filing Fee  | <b>□</b> \$55          | Filing Fee & Certified Copy   |  |  |  |  |
| INHS1  | 8 (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.

| 1. N  | ame of the limited liability company: Biscayne Ho  | using Group, LL  | С   |
|---|--|--|---|
| 2. (a)  | Tabas & Soloff, P.A.   | Tabas  | & Soloff, P.A.  |
| 2. (u)  | Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)   |  | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)  |
|   | 25 S.E. 2nd Ave., Suite 248  | 25 S.E   | . 2nd Ave., Suite 248   |
|   | Miami, Florida 33131   | Miami, Florida 33131<br>L04000065015   |   |
|   | 9-1-04   |  |   |
| 3.  | Date of filing/registration in Florida   | 4.   | Document number   |
| 5. (a)  | Tabas & Soloff, P.A.   |  |   |
| J. (a)  | Registered Agent and Registered Office shown on the records of   | the Florida Dept. of Sta   | ate:  |
|   | Registered Office Address (MUST BE FLORIDA STREET  | ADDRESS)   | _   |
|   | 14 NE 1st Ave., PH   |  | •-  |
|   | Miami, , FI  | 33132  | -<br>-  |
| (L)   | Tabas & Soloff, P.A.   |  |   |
| (b)   | Enter name of NEW Registered Agent and/or NEW Registered   | - 6  |   |
|   |  |  |   |
|   | NEW Registered Office Address:   |  |   |
|   | 25 S.E. 2nd Ave., Suite 248  |  | _   |
|   | Miami , FI   | 33131  | _   |
| the chagent was/w                               | limited liability company is not organized under the la ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members cicles of organization or the operating agreement of the   | f the registered offi-<br>lability company, it<br>of the limited liabil                | ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in   |
|   | 9  | Joel L. Taba   |   |
| l here<br>provis<br>the ob<br>to mer<br>notifie | ature of a member of authorized representative of a member  thy accept the appointment as registered agent and age  ions of all statutes relative to the proper and complete  ligations of my position as registered agent as provide  rely reflect a change in the registered office address, I  ad in writing of this change.  where of Registered Agent | ree to act in this ca<br>performance of m<br>d for in Chapter 60<br>hereby confirm tha | Printed or typed name of signee pacity. I further agree to comply with the values, and I am familiar with and accept 05, F.S. Or, if this document is being filed at the limited liability company has been |

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