## LD40000 71582

(Requestor's Name)					
(Address)					
·					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	WAIT	MAIL.			
	· 5 44 M				
(Bu	siness Entity Nar	ne)			
(Document Number)					
Certified Copies	Certificates	s of Status			
Special Instructions to	Filing Officer:				
<u> </u>					





600318696176

09/26/18--01028--003 \*\*25.00

o;

## 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. Na	ame of the limited liability company: S/ST. LUCIE	PROPE	RTY, L.L.C.	
2. (a)	301 E. LAS OLAS BLVD.	(b) 301 E. LAS OLAS BLVD.		
#. ( <u>u</u> )	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(Note:	ddress of limited liability company:  MAY BE POST OFFICE BOX)
	#210		#210	
	FT. LAUDERDALE, FL. 33301		FT. LAUDERD	ALE, FL. 33301
	OCTOBER 1, 2004	Ŧ	04000071583	# L040000 71582
3.	Date of filing/registration in Florida	4.	Docum	ent number
5. (a)	CORPORATION SERVICE COMPANY			
5. (a)	Registered Agent and Registered Office shown on the records of	the Florida I	Dept. of State:	
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)		
	1201 HAYS STREET		<u>.                                    </u>	
	TALLAHASSEE, FI	32301		•
(b)	STEVEN W. DEUTSCH, ESQ.			
(0)	Enter name of NEW Registered Agent and/or NEW Registerer	d Office add	.527:	٥,
	1875 NW CORPORATE BLVD.			
	NEW Registered Office Address:		<del>_</del>	
	SUITE 100			
	BOCA RATON, FI	L_33431		
the chagent was/w	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited l ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the regist iability cor of the limit e limited lia	ered office and the npany, it is hereby sed liability compa sbility company.	e business office of the registered confirmed that the change(s) any or as otherwise provided in
	Howel Kuch	Z	MAC PM.	S) LC+L V P or typed name of signee
	ture of a member or authorized representative of a member  by 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  ely reflect a change in the registered office address, led in writing of this change.		u this samesits. I	further comes to comply with the
Signati	ure of Registered Agent			

2