

L04000076304

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(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CONECA SUITES AT COURTYARD, LC  
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:

RANDALL L. WOOD

Name of Person

CONECA SUITES AT COURTYARD, LC

Firm/Company

5301 N. FEDERAL HWY SUITE 380

Address

BOCA RATON, FL 33487

City/State and Zip Code

RLWOOD@CONECA.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RANDALL L. WOOD

Name of Person

at ( 954 )

340-5594

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**FILED**  
2011 OCT 17 AM 9:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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. Name of the limited liability company: CONECA SUITES AT COURTYARD, LC
2. (a) Principal office address of limited liability company: 5301 N FEDERAL HWY STE 380

**(Note: MUST BE STREET ADDRESS)**

BOCA RATON, FL 33487

- (b) Mailing address of limited liability company:

SAME

**(Note: MAY BE POST OFFICE BOX)**

10/18/2004

3. Date of filing/registration in Florida

4. Document number

L04000076304

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

DAVID DUNLEAVY

Registered Office Address:

5301 N FEDERAL HWY SUITE 380  
BOCA RATON, FL 33487

- (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW Registered Agent:**

RANDALL L. WOOD

**NEW Registered Office Address:**

11110 NW 26 DRIVE

**(MUST BE FLORIDA STREET ADDRESS)**

CORAL SPRINGS, FL 33065

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

x Randall L. Wood  
Signature of a member or authorized representative of a member

Randall L. Wood  
Printed or typed name of signee

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

x Randall L. Wood  
Signature of Registered Agent

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