## L05000028328

Office Use Only



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SECRUTARY OF STATE ALLAHASSEE, FLORIDA

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C. LEWIS

SEP 1 6 2011

EXAMINER

## COVER LETTER

Division of Cor	porations			٠.	٠.	
SUBJECT:	Urba	an Rea	Itv Ac	lvisors, L	LC	
				ity Compar		
Dear Sir or Madam:						
The enclosed Registere	l Agent/Registered	Office C	hange	and fee(s)	are submitted for filing	
Please return all corresp	ondence concerning	ng this ma	itter to	the follow	ing:	
Marc	cos R Marchena					
- 11 -	ame of Person	· · · · · · · · · · · · · · · · · · ·		<del></del>		
	a and Graham, P	.A.		_		
r	rm/Company					
976 Lake B	aldwin Lane, Suit	e 101		_		
<del> · · · · · · · · · · · · · · · · · · </del>	ndo, FL 32814 tate and Zip Code			_		
Oity/C	tate and Zip Code					
E-mail address: (to be use	no@mgfirm.com	l t notification	1)	_		
For further information	concerning this ma	itter, plea	se call:			
Melissa M	Moreno	at (	407	_)	658-8566	
Name of Pe	son		1	Area Code & I	Daytime Telephone Number	
STREET/COUR				ILING AD		
Registration Section			Registration Section			
Division of Corpo	rations			sion of Corp	porations	
Clifton Building	4 0' 1			Box 6327	11 20214	
2661 Executive C Tallahassee, Flori			I aili	ahassee, Flo	orida 32314	
Enclosed is a ch	eck for the follow	ing amo	ınt:			
<b></b> ✓ \$25 Filing Fe	<del>.</del>	1	\$5	5 Filing Fe	e & Certified Copy	

## 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.

agent, or som, mine state of 1 to tou.				
1. Name of the limited liability company:	Urban Realty Advisors, LLC			
2. (a) Principal office address of limited liability comp	pany: 189 S. Orange Ave			
(Note: MUST BE STREET ADDRESS)	Suite 1700 Orlando, FL 32801			
(b) Mailing address of limited liability company:	189 S. Orange Ave			
(Note: MAY BE POST OFFICE BOX)	Suite 1700 Orlando, FL 32801			
3/22/2005	L05000028328			
3. Date of filing/registration in Florida	4. Document number			
5. (a) Registered Agent and Registered Office shown	on the records of the Florida Dept. of State:			
Registered Agent:	Richard A. Rogers			
Registered Office Address:	Suite 1400 Orlando, FL 32801			
(b) Enter name of <b>NEW Registered Agent</b> and/or l	NEW Registered Office address			
NEW Registered Agent:	Marcos R Marchena R 22			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Marchena and Graham, P.A. 976 Lake Baldwin Lane, Suite 101 Orlando ,FL 32814			
If the limited liability company is not organized under to confirmed that after the change or changes are made, the and the business office of the registered agent will be in liability company, it is hereby confirmed that the change of the members of the limited liability company or as of or the operating agreement of the limited liability company or the operating agreement of the limited liability company or as of the limited liability compan	ne Florida street address of the registered office dentical. Or, in the case of a Florida limited ge(s) was/were authorized by an affirmative vote therwise provided in the articles of organization			
Printed or typed name of signee	<del></del>			
I hereby accept the appointment as registered agent ar comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability comp	nd agree to act in this capacity. I further agree to a proper and complete performance of my duties, position as registered agent as provided for in merely reflect a change in the registered office pany has been notified in writing of this change.			
Division of Corporations, P.O. Box	x 6327, Tallahassee, FL 32314			

**FILING FEE: \$25.00**