## Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

: (050;205~0380 Fax Number

From:

Account Name : NEIL S. SCHECHT, P.A.

Account Number : 120030000065 : (813)353~9500 Fax Number : (813)350-0300

### REGISTERED AGENT CHANGE

#### **BOCA CIEGA TOWNHOMES, LLC**

Certificate of Status	0
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FL DEPT OF STATE

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REVERE TITLE

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#### H060000563003 COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT: Boca Ciega Townhomes, LLC

(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:

Neil S. Schecht

(Name of Person)

Neil S. Schecht, P.A.

(Firm/Company)

3630 W. Kennedy Blvd.

(Address)

Tampa, FL 33609

(City/State and Zip Code)

For further information concerning this matter, please call:

Neil S. Schecht

at (813

353-9500

(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

MAILING ADDRESS:

Registration Section
Division of Corporations

P.O. Box 6327

Tellabassee, Florida 32314

Enclosed is a check for the following amount:

S25 Filing Fee

S55 Filing Fee & Condited Copy

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# 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.
The name of the limited liability company is: Boca Clega Townhomes, LLC
2. The mailing address of the limited liability company is: 3401 37th Street South, Main Office.
St. Petersburg, FL 33711
5/19/05 L05000050122
3. Date of filing/registration in Florida 4. Document number
5. Date of trimgregistration in Profita
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
Andrew Service Corporation of Florida
Name
201 N. Franklin Street, Ste. #2100
Address
Tampa, FL 33602
City, State and Zip
6. The name and address of the new registered agent and/or office:
Neil S. Schecht, P.A.
Name
3630 W. Kennedy Blvd.
Florida street address (P.O. Box NOT acceptable)
Tampa pt 33609 City, State and Zip
City, State and Zip
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.
A V W
(Signature of a member or duthorized representative of a member)
Neil S. Schecht  (Frinted or typer name of signee)
in the second se
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 any duties, and I am familiar with and accept the obligations of my position as registered agent as provided for including the first occurrent is being filled to merely reflect a change in the registered police address. I hereby confirm that the limited liability company has been notified in writing of the change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 **FILING FEE: 525.00** 

(Signature of Registered Auch)

Neil S. Schecht