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T. CLINE

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**EXAMINER** 

## COVER LETTER

Division of Corporations		
SUBJECT: 1916 HOLLYWOOD LL (Name	C of Limited Liability Company)	a
Dear Sir or Madam:		
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for	or filing.
Please return all correspondence concerning	g this matter to the following:	
Cristina D. Moinelo (Name of Person)	<del></del>	
CBA REALTY & MANAGEMENT CORP		
(Firm/Company)		2008 SE: TAL
16375 N.E. 18th Avenue, Suite 325		2008 DEC 15 PM 12: 58 SECRETARY OF STATE TALLAHASSEE. FLORID
(Address)		TARY O
N.M.B FL 33162		DF ST
(City/State and Zip Code)		S8 RIDD
For further information concerning this mat	ter, please call:	
Cristina D. Moinelo	at (305)_948-9311	
(Name of Person)	(Area Code & Daytime Telephon	e 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	ng amount:	
	☐ \$55 Filing Fee & Certified Copy	

TO: Registration Section

## 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 o	of the limited liability company: 1916	HOLLYWOOD LLC
2. (a) Pri	ncipal office address of limited liability lote: MUST BE STREET ADDRESS	company: c/o Jenel Management Corp.  275 Madison Avenue, Suite 702  New York, New York 10016
(b) Ma	illing address of limited liability compa- lote: MAY BE POST OFFICE BOX)	ny; same
05/26/2005	<u>;                                    </u>	L05000052610
3. Date of	filing/registration in Florida	4. Document number
5. (a) Re	gistered Agent and Registered Office sl	nown on the records of the Florida Dept. of State:
Re	gstered Agent:	USA Commercial Residential, Inc.
Re	gistered Office Address:	21406 W. Dixie Highway AVENTURA, FL 33180
(b) Ent	er name of <u>NEW Registered Agent</u> an	d/or NEW Registered Office address:
<u>NE</u>	Registered Agent:	Cristina D. Moinelo
	W Registered Office Address: UST BE FLORIDA STREET ADDRE	CBA REALTY & MANAGEMENT CORP 16375 N.E. 18th Avenue. Suite 325
that after the office of the hereby con liability co	the change or changes are made, the Floring registered agent will be identical. Or firmed that the change(s) was/were aut	nder the laws of the State of Florida, it is hereby confirmed rida street address of the registered office and the business, in the case of a Florida limited liability company, it is horized by an affirmative vote of the members of the limited articles of organization or the operating agreement of the
	member or authorized representative of a member)	<del></del>
	ed name of signee)	<del></del>
I hereby a comply wit an Jamilia Figure the confine the	ccept the appointment as registered age the provisions of all statutes relative to with and sccept the obligations of my this document is being filed to merely r the simited liability company has been	ent and agree to act in this capacity. I further agree to to the proper and complete performance of my duties, and I position as registered agent as provided for in Chapter 608, effect a change in the registered office address, I hereby notified in writing of this change.

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