105000052927

(Requestor's Name)
(Address)
(Madioss)
(Address)
(Ch. (Ch.) - (7) - (7) - (4)
-(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
•

Office Use Only



200182339482

06/22/10--01008--018 **25.00

10 JUN 22 AH 19:54

D. BRUCE
JUN 2 8 2010
EXAMINER

COVER LETTER

10. Registration Section	
Division of Corporations	•
	perties at 2121, LLC
Name of Lin	nited Liability Company
Dear Sir or Madam:	<u>:</u> •
The enclosed Registered Agent/Registered Offi	ice Change and fac(s) are submitted for filing
The enclosed Registered Agent Registered Offi	ice Change and rec(s) are submitted for fining.
Please return all correspondence concerning the	is matter to the following:
Ronald Gavsie Name of Person	
Name of Ferson	4
Equity Poolty Corporation	
Equity Realty Corporation Firm/Company	
	10
· · · · · · · · · · · · · · · · · · ·	
2121 N.W. 139th Street, Bay #1	660.44
Audicos	
•	WI B: 5t
Opa Locka, Florida 33054	
City/State and Zip Code	2 2
rgaysie@danron.com	
rgavsie@danron.com E-mail address: (to be used for future annual report notif	fication)
For further information concerning this matter,	please call:
Ronald Gavsie	at (305) 687-6080
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	
Enclosed is a check for the following	amount:
\$25 Filing Fee	\$55 Filing Fee & 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.

1. Name of the limited liability company:L	ira Properties at 2121, LLC	
2. (a) Principal office address of limited liability compan	y: 10225 Collins Avenue	
(Note: MUST BE STREET ADDRESS)	Suite 1401 Bal Harbour, Florida 33154	
(b) Mailing address of limited liability company:	10225 Collins Avenue	
(Note: MAY BE POST OFFICE BOX)	Suite 1401 Bal Harbour, Florida 33154	
05/26/2005	L05000052927	
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:	CHRISTOPHER M. TRAPANI, P.A.	
Registered Office Address:	6565 TAFT STREET SUITE 106 HOLLYWOOD FL 33024	
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address		
NEW Registered Agent:	RONALD GAVSIE	
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2121 N.W. 139th Street Bay #1	
	Opa Locka ,FL33054	
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. Signature of a member or authorized representative of a member		
Printed or typed name of signee		
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my per Chapter 608, P.S. Or is in accument is being filed to me address, I hereby carrie that the limited liability companies is greature of Registered Agent	agree to act in this capacity. I further agree to oper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office by has been notified in writing of this change.	
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00		