(C500070484

(Re	equestor's Name)					
(Address)						
(Ac	idress)					
(Ci	ty/State/Zip/Phon	e #)				
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
		,				





100289176551

09/01/16--01020--005 **25.00

SEP 0 6 2016

S. YOUNG

TALEAHASSEE TLORIDA

COVER LETTER

TO: Registration Section Division of Corporations								
SUBJECT: Lago Club Apartments, 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:								
Nurysel Trutillo Name of Person								
united Property Management Firm/Company								
8730 NW ELAN-e Address								
Miami, FL 33147 City/State and Zip Code								
NTrutillo Qunuled Property mgt. Com E-mail address: (to be used for future annual report notification)								
For further information concerning this matter, please call:								
Nury Trujilo at (205) 558.000								
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 \$\text{Certified Copy}\$								

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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. N	Tame of the limited liability company:	Club 7	Apartr	ments,	LLC
2. (a)	3211 Ponce De Leon BluD	(b) <u>321</u>	1 Pance	De Lea	M BIVD
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		-	s of limited liability Y BE POST OFFICE	
	suite 201	Sui	te ac)	
	coral Gables, FL33134	<u> </u>	1 Bak	ics, Fl	33134
	9/14/05	L05		70484	
3.	Date of filing/registration in Florida	4.	Document	number	<u></u>
5. (a)				,	6
	Registered Agent and Registered Office shown on the records of the		ate:		6 SEP
	Registered Office Address (MUST BE FLORIDA STREET A)		_		
	suite aol				2
	Coral Galdes ,FL	33134	_		PH 4: 01
(b)	ZOVLUCK, LYNN				
(0)	Enter name of NEW Registered Agent and/or NEW Registered C	Office address:	<u> </u>		
	8730 NW 36 AVE				
	NEW Registered Office Address:		_		
			_		
	V 1. 300	004.7			
	Miami, FL	33144			
the chagent was/w	limited liability company is not organized under the laws lange or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited liab were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the li	he registered offi pility company, it the limited liabil	ce and the bu is hereby cor ity company (siness office of afirmed that the	the registered change(s)
- Ciona	anure of a member or authorized tepresentative of a member	Rex	M.	Barke ped name of signee	
0-		e to act in this ca	•		nply with the
provis the ob to mer notifie	eby accept the appointment as registered agent and agre sions of all statutes relative to the proper and complete p pligations of my position as registered agent as provided rely reflect a change in the registered office address, I hi ed in writing of this change.	erformance of m for in Chapter 60 ereby confirm tha	duties, ånd .)5, F.S. Or, i t the limited i	l am familiar wi f this document liability compan	th and accept is being filed y has been
Signati	rure of Registered Agent				
•	Division of Cornerations P.O. Re	nv 6327 a Tallah	эсса FI 32 3	R14	

FILING FEE: \$25.00