## L05000097708

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EXAMINER

## **COVER LETTER**

TO:	Registration Section Division of Corporations	
	0.10011.0001.0001	
SUBJ	JECT: CARRINGTON ESTAT	ES, LLC e of Limited Liability Company)
	(14ante	of Ellinted Liability Company)
Dear	Sir or Madam:	
The e	enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.
Please	e return all correspondence concernin	g this matter to the following:
TYLER	R A. GOLD, ESQ. (Name of Person)	
	(**************************************	
TYLEF	R A. GOLD, P.A.	·
	(Firm/Company)	
		•
1000	S. PINE ISLAND RD., #310	
	(Address)	
DLAN	ITATION EL 22224	
PLAN	(City/State and Zip Code)	
	(exyrbiaio and sip code)	
For fi	urther information concerning this ma	ttar plassa call·
1 01 10	ituel unormation concerning this ma	tter, prease can.
TYLEI	R A. GOLD, ESQ.	at ( 954 ) 565-5577
	(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 32301	Tallahassee, Florida 32314
	Enclosed is a check for the following	ing 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: CARRING	TON ESTATES, LLC	
<ol> <li>(a) Principal office address of limited liability compart (Note: MUST BE STREET ADDRESS)</li> </ol>	ny: 9825 MARINA BLVD. #100  BOCA RATON, FL 33428	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	9825 MARINA BLVD. #100 BOCA RATON, FL 33428	
10/04/05  3. Date of filing/registration in Florida	L05000097708 4. Document number	
5. (a) Registered Agent and Registered Office shown or	n the records of the Florida Dept. of State:	
Registered Agent:	ARACELLI BROWN	
Registered Office Address:	9825 MARINA BLVD. #100 BOCA RATON, FL 33428	•
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	EW Registered Office address:	
NEW Registered Agent:	JESSE GADDIS	+
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	221 W. OAKLAND PARK BLVD.	
	FT. LAUDERDALE,FL 33311	
If the limited liability company is not organized under the that after the change or changes are made, the Florida stroffice of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles limited Hability company.  (Signature of a member or authorized representative of a member)	eet address of the registered office and the business case of a Florida limited liability company, it is by an affirmative vote of the members of the limited	
ARACELLI BROWN (Printed or typed name of signee)	<del></del>	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the part amiliar with and accept the obligations of my positic F.S. Or, if this document is being filed to merely reflect confirm that the limited liability company has been notification.  (Signature of Registered Agent)  Division of Corporations, P.O. Be FILING FE	or oper and complete performance of my duties, and I on as registered agent as provided for in Chapter 608, a change in the registered office address, I hereby led in writing of this change?  ox 6327, Tallahassee, FL 23142  EE: \$25.00	
INHS18 (05/08)		