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EXAMINER



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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Lynn Financial Center, (Name	LLC e 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 concernin	g this matter to the following:	
Ryan D. Bailine, Esq. (Name of Person)		
Shutts & Bowen, LLP (Firm/Company)	<u> </u>	
Suite 1500, 201 South Biscayne Boulevard (Address)		
Miami, Florida 33131 (City/State and Zip Code)		
For further information concerning this ma	tter, please call:	
Ryan D. Bailine, Esq. (Name of Person)	at (305) 347-7354 (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 Tallahassee, Florida 32314	
Enclosed is a check for the follow	ing amount:	
☐ \$25 Filing Fee		

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: Lynn Financial Center, LLC			
2. (a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	/: 1905 NW Corporate Boulevard Boca Raton, Florida 33444	
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1905 NW Corporate Boulevard Boca Raton, Florida 33444	
<u>01/10/2</u> 3. Dat		L06000003946 4. Document number	
5. (a)	Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:	
	Registered Agent:	David B. Dickenson, Esq.	
	Registered Office Address:	980 North Federal Highway Suite 410 Boca Raton, FL 33432	
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:			
	NEW Registered Agent:	Ryan D. Bailine, Esq.	
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Shutts & Bowen, LLP Suite 1500, 201 S. Biscayne Boulevard Miami ,FL 33131	
that aft office of hereby liability limited	imited liability company is not organized under the left the change or changes are made, the Florida stree of the registered agent will be identical. Or, in the confirmed that the change(s) was/were authorized by company or as otherwise provided in the articles of liability company.	t address of the registered office and the business	
(Printed	AN CARL SON or typed name of signee)		
1	by accept the appointment as registered agent and a with the provisions of all statutes relative to the provision with and accept the obligations of my position r, if this document is being filed to merely reflect a contact the limited liability company has been notified to the liability		

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