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COVER LETTER

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: Daid A Dweck Name of Person Coconut Creek Real Estate, LCC Firm/Company 4851W Hilsboro Blvd HAH Address Cocout: Creek, Fr. 33073 City/State and Zip Code Name of David Dweck, com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: April Dweck May Ference Real Estate April 2000 April 2000 Estate Real Estate LCC Firm/Company April 2000 For further information concerning this matter, please call:	
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David A. Dweck Name of Person Coconut Creek Real Estate, LCC Firm/Company 4851 W Hillsboso Blud HAY Address Cocout Creek, It 33073 City/State and Zip Code Noney @ David Dweck, com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: April Dweck May Ferfer as 354-1000	gistered Office Change and fee(s) are submitted for filing.
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Dueck/ Vory Ferre 931, 354-1000	•
Name of Person Area Code & Daytime Telephone Nu	ny Ferreira 354-1000 Area Code & Daytime Telephone Number
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303	Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

☐ \$55 Filing Fee & Certified Copy

\$25 Filing Fee

Enclosed is a check for the following amount:

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. Name of the limited liability company: Coconut Creek Real 5 State
A
2. (a) 4851 W. Hills box Blad Suit (b) 3300 A Mailing address of limited liability company:
(Note: MAY BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
Coconut Creek, FL 33013
2-17-2006 L06000018109
3. Date of filing/registration in Florida 4. Document number
5. (a) Notono I. Nosco Pa
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
2600 So Doveres Ra #1008
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Coral Gabies, FL 33134
(b) Siceel & Siegel, Pa
Enter name of NEW Registered Agent and or NEW Registered Office address:
Enter name of NEW Registered Agent and/or NEW Registered Office address:
NEW Registered Office Address:
33432
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 of authorized representative of a member David Dweck Mchager
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.
Signature of Registered Agent
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FILING FEE: \$25.00
INHS18 (2/14)