· LO6000040143

(De	ancestada Nomes	
(Re	equestor's Name)	
(Ac	ldress)	
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PICK-UP	☐ WAIT	MAIL
(Ві	isiness Entity Name)
(Do	ocument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	
1	Office Use Only	· · · · · · · · · · · · · · · · · · ·



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SEP 0.9 2014 C. CARROTHERS



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	ame of the limited liability company: LITTLE HAY	/ANA - 25	NW 16 AV, LLC				
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	688 BREWERS BRIDGE ROAD, #2	6	888 BREWERS BRI	DGE R	ROAE), #2	
	JACKSON, NJ 08527		ACKSON, NJ 0852	7			
	04/19/2006	L(06000040743				
3.	Date of filing/registration in Florida	4.	Document nun	nber			
5. (a)							
J. (u)	Registered Agent and Registered Office shown on the records of CORPDIRECT AGENTS, INC.	f the Florida De	ept. of State:				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)					
	1200 SOUTH PINE ISLAND ROAD				ŢĖ		
	PLANTATION, FI	L_33324			AUG	******	
(b)					29		Ţ
(0)	Enter name of NEW Registered Agent and/or NEW Registered	d Office addre	<u>ss</u> :	71	P.	(and	\$
	SG REGISTERED AGENT LLC				<u>ဒူ</u> [ဦး		•
	NEW Registered Office Address:						
	700 S. FEDERAL HIGHWAY, SUITE 200						
	BOCA RATON . FI	L 33432					
the cha agent was/w the art	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the attree of a member or authorized representative of a member aby accept the appointment as registered agent and agricultures of all statutes relative to the proper and complete	of the register iability composite the limite e limited liab	red office and the busine pany, it is hereby confire d liability company or a bility company. ELI BLEEN Printed or typed	ess officemed that so otherward MAN mame of s	t the wise p	he regi change provided	stered (s) d in
the ob- to mer notifie	by accept the appointment as registered agent and ag ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	ed for in Cha hereby conf	apter 605, F.S. Or, if the limited liab	is docur ility cor	nent i npany	is being v has be	filed een
Signati	ure of Registered Agent						