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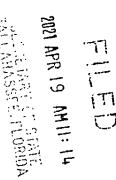
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## COVER LETTER

	istration Section ision of Corporations						
SUBJECT:	Engel & Voelkers Florida Resider	itial, LLC					
Name of Limited Liability Company							
Dear Sir or	Madam:						
The enclose	d Registered Agent/Registered C	Office Change and	fee(s) are submitted for filing.				
Please retur	n all correspondence concerning	this matter to the	following:				
Rebecca Sch	midgall						
	Name of Person						
Engel & Voe	lkers Florida Residential, LLC						
	Firm/Company		_				
633 Tamiam	i Trail N., Suite 201						
	Address		<del></del>				
Naples, FL 3	34102-0137						
	City/State and Zip Code	:	_				
	nidgall@evrealestate.com						
E-mail	address: (to be used for future a	nnual report notif	ication)				
For further i	nformation concerning this matte	er, please call:					
Rebecca Sch	midgall	239 at (	348-9000				
	Name of Person		Area Code & Daytime Telephone Number				
<u>Ma</u>	iling Address:		Street Address:				
	gistration Section		Registration Section				
	ision of Corporations		Division of Corporations				
	. Box 6327		The Centre of Tallahassee				
Tall	lahassee, FL 32314		2415 N. Monroe Street, Suite 810				
			Tallahassee, FL 32303				
Enc	losed is a check for the following	ng amount:					
<b>■</b> \$	25 Filing Fee	<b>□</b> \$:	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 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.

Principal office address of lin (Note: MUST BE STR 633 Tamiami Trail N., Stc. 201 Naples, FL 34102-6137  October 23, 2006 3. Date of filing/registra 5. (a) AJ GLOBAL MANAGEMENT, Registered Agent and Registered Office Address 5830 COPPER LEAF LANE Naples  (b) Rebecca Schmidgall Enter name of NEW Registered Age  NEW Registered Office Address: 633 Tamiami Trail N., Stc. 201 Naples	tion in Florida		Mailing addr ( <u>Note: M.</u> Same 06000103038 Documen	ress of limited liability company:  AY BE POST OFFICE BOX)  It number
Principal office address of lin (Note: MUST BE STR 633 Tamiami Trail N., Ste. 201 Naples, FL 34102-6137  October 23, 2006  3. Date of filing/registra AJ GLOBAL MANAGEMENT. Registered Agent and Registered Office Address 5830 COPPER LEAF LANE Naples  (b) Rebecca Schmidgall Enter name of NEW Registered Age  NEW Registered Office Address: 633 Tamiami Trail N., Ste. 201  Naples	tion in Florida		Mailing addr ( <u>Note: M.</u> Same 06000103038 Documen	ress of limited liability company:  AY BE POST OFFICE BON)
October 23, 2006  3. Date of filing/registra  5. (a) AJ GLOBAL MANAGEMENT. Registered Agent and Registered Off Registered Office Address (MUS) 5830 COPPER LEAF LANE Naples  (b) Rebecca Schmidgall Enter name of NEW Registered Age  NEW Registered Office Address: 633 Tanniami Trail N., Ste. 201  Naples	LLC		06000103038 Documen	t number
October 23, 2006  3. Date of filing/registra AJ GLOBAL MANAGEMENT. Registered Agent and Registered Off Registered Office Address (MUS 5830 COPPER LEAF LANE Naples  (b) Rebecca Schmidgall Enter name of NEW Registered Age  NEW Registered Office Address: 633 Tamiami Trail N., Ste. 201  Naples	LLC	4.	Documen	t number
3. Date of filing/registra 5. (a) AJ GLOBAL MANAGEMENT. Registered Agent and Registered Off Registered Office Address (MUS) 5830 COPPER LEAF LANE Naples  (b) Rebecca Schmidgall Enter name of NEW Registered Age  NEW Registered Office Address: 633 Tamiami Trail N., Ste. 201  Naples	LLC	4.	Documen	t number
5. (a)  AJ GLOBAL MANAGEMENT.  Registered Agent and Registered Off  Registered Office Address (MUS  5830 COPPER LEAF LANE  Naples  (b)  Rebecca Schmidgall  Enter name of NEW Registered Age  NEW Registered Office Address:  633 Tamiami Trail N., Ste. 201  Naples	LLC		. <u></u>	t number
Registered Agent and Registered Off Registered Office Address (MUS) 5830 COPPER LEAF LANE Naples  (b) Rebecca Schmidgall Enter name of NEW Registered Age  NEW Registered Office Address: 633 Tamiami Trail N., Ste. 201  Naples		of the Florida E	Dept, of State:	
Registered Agent and Registered Office Registered Office Address (MUS) 5830 COPPER LEAF LANE Naples  (b) Rebecca Schmidgall Enter name of NEW Registered Age  NEW Registered Office Address: 633 Tamiami Trail N., Ste. 201  Naples	ice shown on the records	of the Florida E	Dept, of State:	
5830 COPPER LEAF LANE  Naples  (b) Rebecca Schmidgall  Enter name of NEW Registered Age  NEW Registered Office Address: 633 Tamiami Trail N., Ste. 201  Naples				
(b)  Rebecca Schmidgall  Enter name of NEW Registered Age  NEW Registered Office Address: 633 Tamiami Trail N., Ste. 201  Naples	T BE FLORIDA STREI	ET ADDRESS)	<del></del>	<b>2</b> 1
(b) Rebecca Schmidgall  Enter name of NEW Registered Age  NEW Registered Office Address: 633 Tamiami Trail N., Ste. 201  Naples				22
(b) Rebecca Schmidgall  Enter name of NEW Registered Age  NEW Registered Office Address: 633 Tamiami Trail N., Ste. 201  Naples		FL		2021 APR 19
NEW Registered Office Address:  633 Tamiami Trail N., Ste. 201				1.50
633 Tamiami Trail N., Ste. 201 Naples	nt and/or NEW Registe	red Office addr	<u>1645</u> :	MIII: IL
Naples			<del></del>	
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		FL 34116		
change or changes are made, the Floriagent will be identical. Or, in the case was/were authorized by an affirmative the articles of organization or the oper.  Signature of a member or authorized represent the appointment as re-	da street address of to of a Florida limited vole of the member ating agreement of to mative of a member	the registered liability comes of the limited liability limited liability limited liability limited liability liabil	office and the busin apany, it is hereby co- ed liability company bility company.  Khammash, Managing  Printed or to	onfirmed that the change(s) or as otherwise provided in g Partner typed name of signee
provisions of all statutes relative to the obligations of my position as regis to merely reflect a change in the regist notified in writing of this change.  Signature of Registered Agent	: proper and comple tered agent as provid tered office address.	tte performan ded for in Ch Thereby conj	ce of my duties, and apter 605, F.S. Or, firm that the limited	(Lam familiar with and accept if this document is being filed Tiability company has been

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