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## COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Stadium North, LLC (Name 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 concerning this matter to the following:			
Daniel R. Doorakian Esq. (Name of Person)			
Moyle, Flangan, Katz, et al (Firm/Company)			
625 North Flagler Drive, 9th Floor (Address)			
West Palm Beach, FL 33401 (City/State and Zip Code)	<del></del>		
For further information concerning this matter, please call:			
Mari-Ellen Sheldon Legal Asst. at (5) (Name of Person)	(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 following 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.

agent, or both, in the state of Piortaa.			
1. The name of the limited liability company is: Stac	lium North LLC		
2. The mailing address of the limited liability company is	: 24 NE 24 th Avenue		
	Pompano Beach FL 33062		
May 08, 2007	L07000848996		
3. Date of filing/registration in Florida	4. Document number		
5. The name of the registered agent and the registered office Florida Department of State:	ce address as shown on the records of the		
Anthony Oitocco,	<del></del>		
24 NF 24 15 Avenue Address			
Pompano Beach Fl City, State and	SECRETAR Zip Office:		
6. The name and address of the new registered agent and/o	r office:		
Daniel R. Doora Kiai Name 625 North Flagler Driv Florida street address (P.O. Bo	$n = 9^{th} Floor = 3$		
Nest Palm Beach, FL 3 City, State and Z	33401 ip		
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 member or authorized representative of a member)  MMCT BUUSSUMD			
(Printed or typed name of signee)	anno do nadio dhin anno sid. I Cond.		
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pround I am familiar with and accept the obligations of my pochapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to sper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office y 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