

LD7000055948

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

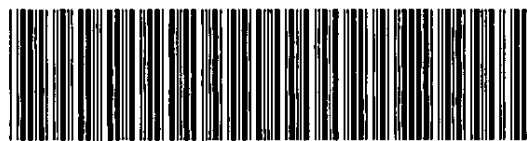
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100253859221

12/09/13--01027--014 **25.00

13 DEC -9 PM 12:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

C. LEWIS
DEC 10 2013
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Gulf City Plaza, 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:

Lisa Alexander

Name of Person

Strategic Realty Services, LLC

Firm/Company

500 Northpoint Parkway Ste 300

Address

West Palm Beach FL 33407

City/State and Zip Code

lalexander@strategicrealty.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lisa Alexander at (561) 471-5353
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.

1. Name of the limited liability company: Gulf City Plaza, LLC

2. (a) Principal office address of limited liability company: 2845 N Military Trail
West Palm Beach, FL 33409
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company: 500 Northpoint Parkway Suite 300
West Palm Beach, FL 33407
(Note: MAY BE POST OFFICE BOX)

May 25, 2007

3. Date of filing/registration in Florida

L07000055948

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State

Registered Agent: Strategic Realty Services, LLC

Registered Office Address: 901 Northpoint Parkway Suite 200
West Palm Beach, FL 33407

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address:**

NEW Registered Agent: _____

NEW Registered Office Address: 500 Northpoint Parkway Suite 300
(MUST BE FLORIDA STREET ADDRESS)
West Palm Beach, FL 33407

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]
Signature of a member or authorized representative of a member

D. Glen Alexander
Printed or typed name of signee

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 608, 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]
Signature of Registered Agent

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

APPROVED
AND
FILED
13 DEC -9 PM 12:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA