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EXABITMER

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: WEST END MHP, LLC				
Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office	e Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this	matter to the following:			
NORA H. MILLER, ESQ.				
Name of Person				
RAILEY, HARDING & ALLEN, P.A.				
Firm/Company	· · · · · · · · · · · · · · · · · · ·			
15 N. EOLA DRIVE				
Address				
ORLANDO, FL 32801				
City/State and Zip Code				
NMILLER@RAILEYHARDING.COM				
E-mail address: (to be used for future annua	al report notification)			
For further information concerning this matter, p	lease call:			
NORA MILLER	407 648-9119			
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			
INHS18 (2/14)				

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.

l. Na	me of the limited liability company: WEST END	MHP, LLC	
			Mailing address of limited liability company:
` '	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	510 GATLIN AVE	POST	OFFICE BOX 560219
	ORLANDO, FL 32806	ORLAN	IDO, FL 32856
	05/29/2007	L070000	056020
3.	Date of filing/registration in Florida	4.	Document number
5. (a)		•	
J. (a)	Registered Agent and Registered Office shown on the records o SMITH, JAMIE G	f the Florida Dept. of Sta	ate:
	Registered Office Address (MUST BE FLORIDA STREET 510 GATLIN AVENUE	ADDRESS)	
	ORLANDO , F	32806	
			BASSET ARY
(b)	Enter name of NEW Registered Agent and/or NEW Registered	ed Office address:	SEE.
	RAILEY, HARDING & ALLEN, P.A.		TALLAHASSEE, FLORIE
	NEW Registered Office Address:		- INC.
	15 N. EOLA DRIVE		<u>-</u>
	ORLANDO , F	_{71_} 32801	
the ch agent was/w the ar Sign	limited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members ticles of organization or the operating agreement of the authorized representative of a member or authorized representative of a member	aws of the State of F of the registered offi liability company, it is of the limited liabil ne limited liability co NORA MILL	ce and the business office of the registered is hereby confirmed that the change(s) lity company or as otherwise provided in ompany. LER, Authorized Representative Printed or typed name of signee anacity. I further agree to comply with the
notific	sions of all statutes relative to the proper and comple ligations of my position as registered agent as provid rely reflect a change in the registered office address, ed in writing of this change.	te perjoinlance of m ded for in Chapter 6 I hereby confirm tha	os, F.S. Or, if this document is being filed at the limited liability company has been