

L07000118860

Florida Department of State  
Division of Corporations  
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## To:

Division of Corporations  
Fax Number : (850) 617-6383

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Account Name : C T CORPORATION SYSTEM  
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Phone : (850) 222-1092  
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SECRETARY OF STATE  
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REGISTERED AGENT CHANGE  
PEAK REALTY PARTNERS, LLC

Certificate of Status	0
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Estimated Charge	\$35.00

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**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: Peak Realty Partners, LLC

2. (a) Principal office address of limited liability company: 711 Fifth Avenue South

☐ (Note: **MUST BE STREET ADDRESS**) Suite 200, Naples FL 34102-6628

(b) Mailing address of limited liability company: Same

☐ (Note: **MAY BE POST OFFICE BOX**)

3. Date of filing/registration in Florida 11/28/2007 4. Document number L07000118860

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

Registered Agent: Michael J Volpe

Registered Office Address: 711 Fifth Ave S. Ste 200  
Miller & Ciresi, LLC  
Naples, FL 34102-6628

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

**NEW Registered Agent:** CT Corporation System

**NEW Registered Office Address:** 1200 South Pine Island Road

**(MUST BE FLORIDA STREET ADDRESS)** Plantation, FL 33324

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.

Daniel Wierman  
Signature of a member or authorized representative of a member

DANIEL WIERMAN  
Printed or typed name of signer

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.

By: CT Corporation System Chris Blum, Asst. Secretary  
Signature of Registered Agent

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

TNHS18 (05/08)

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STATE OF FLORIDA  
DIVISION OF CORPORATIONS