

LO80000015523

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2804 Gateway Oaks Drive #200 Sacramento, CA 95833

Phone (800)533-7272 Fax (800)603-5868

REFERENCE # MUST BE ON INVOICE TO BE PAID

NUMBER PAGES:

Date: April 01, 2013

AE: Ninh Ho

TO: Florida Department of State

H1080

REFERENCE: 715737

P.O. Box 6327

Tallahassee, FL 32314

FAX:

PLEASE PERFORM THE FOLLOWING:

AQUEL II ASSOCIATES, LLC

Change of Registered Agent

IN FL

SPECIAL INSTRUCTIONS: Please file on a routine and return one plain copy.

<u>Service Description</u>	<u>Check Number</u>	<u>Name</u>	<u>Amount</u>
Change of Registered Agent	419851	Florida Department of State	\$25

PLEASE RETURN: Regular Mail

PLEASE CALL (800)533-7272 ATTN: Ninh Ho TO CONFIRM FILING RESULTS

RETURN TO: PARASEC - 2804 GATEWAY OAKS DRIVE #200 SACRAMENTO, CA 95833

CALL IMMEDIATELY IF YOU HAVE ANY QUESTIONS OR THE DEADLINE WILL NOT BE MET (800)
533-7272

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: AQUEL II ASSOCIATES, LLC

2. (a) Principal office address of limited liability company: 791 Park of Commerce Drive
(Note: **MUST BE STREET ADDRESS**) Boca Raton, FL 33487

(b) Mailing address of limited liability company: 791 Park of Commerce Drive
(Note: **MAY BE POST OFFICE BOX**) Boca Raton, FL 33487

2/12/2008

L08000015523

3. Date of filing/registration in Florida

4. Document number

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

Registered Agent: Scott A. Elk, P.A.

Registered Office Address: 750 Park of Commerce Drive, Suite 400
Boca Raton, FL 33487

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

NEW Registered Agent: Paracorp Incorporated

NEW Registered Office Address: 236 East 6th Avenue
(**MUST BE FLORIDA STREET ADDRESS**) Tallahassee, FL 32303

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.

Marsha Uemansk
Signature of a member or authorized representative of a member

Marsha Uemansk
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.

NINH HO, ASST. SECRETARY
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

FILED
13 APR 2008
3:27
TALLAHASSEE
STATE
OF FLORIDA