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## **COVER LETTER**

	Registration Section Division of Corporations				
SUBJECT	r. Museum Walk Apartments, LL	C			
SOBOLE		Limited Liab	nility Company		
Dear Sir o	r Madam:				
The enclos	sed Registered Agent/Registered Office (	Change and fe	e(s) are submitted for filing.		
Please retu	arn all correspondence concerning this m	atter to the fol	llowing:		
Joshua I	M. Entin, Esq				
	Name of Person		-		
Entin & l	Della Fera, P.A.				
	Firm/Company		-		
633 S. A	andrew Ave. Suite 500				
	Address		-		
Ft. Laud	edale, Fl 33301				
	City/State and Zip Code		-		
raul.fron	tal@southbeachgroup.com				
E-ma	ail address: (to be used for future annual	report notifica	ation)		
For furthe	r information concerning this matter, ple	ase call:			
Raul Fro		305	609-6700		
	Name of Person		Area Code & Daytime Telephone Number		
Ro D Cl 26	egistration Section ivision of Corporations lifton Building 661 Executive Center Circle allahassee, Florida 32301	Regis Divis P.O.	LING ADDRESS: stration Section sion of Corporations Box 6327 hassee, Florida 32314		
Enclosed is a check for the following amount:					
	\$25 Filing Fee	<b>□</b> \$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.

1. N	name of the fimiled flability company:		rtments, LLC	
2. (a		(b	(b) 808 Collins Ave.	
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Miami Beach, Fl 33140		Attn. Raul Frontal	
		<del></del>	Miami Beach, FI 33139	
	05/05/2008		L08000049496	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a	Entin, Joshua M. Esq			
٥. (د	Registered Agent and Registered Office shown on the records o	of the Florida	da Dept. of State:	
	110 S.E. 6th Street			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		<u> </u>	
	Suite 1970			
	Ft. Lauderdale	<sub>L</sub> 33301		
(b	Entin, Joshua M. Esq			
`	Enter name of NEW Registered Agent and/or NEW Registered	ed Office ad		
	633 S. Andrews Ave.			
	NEW Registered Office Address:			
	Suite 500	·····-		
	Ft. Lauderdale , F	<sub>L</sub> 33301	1	
the clagent was/v	limited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members rticles of organization or the operating agreement of the	of the regi liability co of the ling e limited	gistered office and the business office of the regis company, it is hereby confirmed that the change(s mited liability company or as otherwise provided I liability company.	tered s)
		Ala	an Lieberman  Printed or typed name of signee	
I her provi the o to me	nature of a member or authorized representative of a member reby accept the appointment as registered agent and as sions of all statutes relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address, and in writing of this change.	gree to ac le perform led for in ( I hereby c	act in this capacity. I further agree to comply with	n the ecept filed en

Signature of Registered Agent