## 10800000008393

(Requestor's Name)	<u> </u>
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT M	AIL
(Business Entity Name)	
(Document Number)	
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D. BRUCE

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**EXAMINER** 

## **COVER LETTER**

Division of Corporations					
SUBJECT: 2579 North Lake Prop Name of Limited	osestles LLC   Liability Company	_			
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.				
Please return all correspondence concerning this ma	atter to the following:				
Michael BEAm Name of Person					
2579 NORTH LAKE PROPERTY	e, LLC	11 HAY -9	france version		
11 VANdAM ST Address	GRADIA TASS	-			
New York NY 100/3 City/State and Zip Code		ō			
beammichaelChoTmail.con E-mail address: (to be used for future annual report notification	on)				
For further information concerning this matter, please call:					
Michael BEAm at (at (	9/7 ) 686-431-2 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	355 Filing Fee & Certified Copy				

TO: Registration Section

## 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: 2579 Nov	eThLAKE PROPRITION LLC
2. (a) Principal office address of limited liability company	ST
(Note: MUST BE STREET ADDRESS)	New York, NY 100/3
(b) Mailing address of limited liability company:	11 VANDAM ST
(Note: MAY BE POST OFFICE BOX)	New york, Ny 100/3
7/15/2008	L08000068393
3. Date of filing/registration in Florida	Document number
5. (a) Registered Agent and Registered Office shown on the	he records of the Florida Dept. of State:
Registered Agent:	DAVID K BLATTHOR
Registered Office Address:	3351 BOCA RATON BONLEVARD NW BOCA RATON, FL 33431
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :  NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Fowler White Boss P. A. 1200 EAST LAS OLAS BONDWARD STE 400
If the limited liability company is not organized under the laconfirmed that after the change or changes are made, the Fland the business office of the registered agent will be identiliability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member  Thereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the province of the province of the confirmation of the limited liability company.  Chapter 608, F.S. Or, if this document is being filed to men address, I hereby confirm that the limited liability company.	aws of the State of Florida, it is hereby orida street address of the registered offse real. Or, in the case of a Florida limited was/were authorized by an affirmative ybte wise provided in the articles of organization
Signature of Registered Agent	

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