L08000105939

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S. HAWKES

MAR 2 4 2003

EXAMINER

COVER LETTER

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Division of Corporations		
SUBJECT: Allegra's Royal Palm Property Group, LLC		
(Name of Limited Liability Company)		
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this r	natter to the following:	
Richard K. Morley		
(Name of Person)		
Gebert & Morley, LLC		
(Firm/Company)		
137 N. Oak Park Avenue, Suite 201	•	
(Address)	-	
Oak Park, IL 60301		
(City/State and Zip Code)		
For further information concerning this matter, ple	ease call:	
Richard K. Morley	708 763-9995	
(Name of Person)	(Area Code & Daytime Telephone Number)	
(Nume of Ferson)	(Med Code & Baytime Telephone Humber)	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314	
Enclosed is a check for the following am	ount:	
☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy	
-		

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: Allegra's F	Royal Palm Property Group, LLC
2. (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	ny: 1515 S. Federal Highway, Suite 308 Boca Raton, FL 33432
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1515 S. Federal Highway, Suite 308 Boca Raton, FL 33432
November 13, 2008	<u>L08000105939</u> い
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown o	n the records of the Florida Dept. of State:
Registered Agent:	Cris Bennardo
Registered Office Address:	1860 N.W. Boca Raton Blvd. Boca Raton, FL 33432
(b) Enter name of NEW Registered Agent and/or N NEW Registered Agent:	SHINER & SOSIN, P.A.
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	95 S. Federal Highway, 1st Fl.
	Boca Raton
If the limited liability company is not organized under the that after the change or changes are made, the Florida structure of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles limited liability company. (Signature of a member or authorized representative of a member)	eet address of the registered office and the business case of a Florida limited liability company, it is by an affirmative vote of the members of the limited
Robert V. Allegra (Printed or typed name of signee)	<u> </u>
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pam familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect confirm that the limited liability company has been notification.	l agree to act in this capacity. I further agree to proper and complete performance of my duties, and I on as registered agent as provided for in Chapter 608, a change in the registered office address, I hereby ted in writing of this change.

(Signature of Registered Agent)

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