

L08000/06225

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

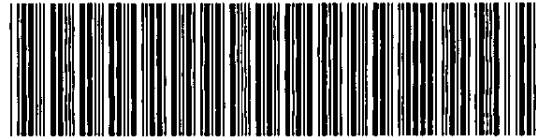
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000258544980

04/04/14--01026--001 **25.00

RECEIVED
14 APR -4 PM 1:34
DIVISION OF CORPORATE AFFAIRS

FILED
14 APR -4 PM 4:55
SECRETARY OF STATE
DIVISION OF CORPORATE AFFAIRS
RA [Signature]
H/L [Signature]
DC [Signature]

CORP DIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-23

CONTACT: MICHELE HOLDEN

DATE: 04/04/2014

REF. #: 9104772

CORP. NAME: LOLA 813 LLC

- | | | |
|--|---|--|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| (XX) OTHER: CHANGE OF REGISTERED AGENT | | |

STATE FEES PREPAID WITH CHECK# 70017985 FOR \$ 25.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ COST LIMIT: \$ _____

PLEASE RETURN:

- | | | |
|--|---|-------------------------|
| <input type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | (XX) PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

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. Name of the limited liability company: LOLA 813 LLC

2. (a) 2046 W Pierce St

Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)

Chicago, IL 60622

(b) 2046 W Pierce St

Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)

Chicago, IL 60622

11/14/2008

3. Date of filing/registration in Florida

L08000106225

4. Document number

5. (a) SMITH, PETER C

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

6799 Collins Ave, Unit 501

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

MIAMI BEACH, FL 33141

(b) NRAI SERVICES, INC.

Enter name of NEW Registered Agent and/or NEW Registered Office address:

1200 SOUTH PINE ISLAND ROAD

NEW Registered Office Address:

PLANTATION, FL 33324

FILED
14 APR - 4 PM 4:55
TALLAHASSEE, FL 32314
SECRETARY OF STATE

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.

Angela Robertson
Signature of a member or authorized representative of a member

ANGELA ROBERTSON
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 605, 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.

Michael H. St. Sel.
Signature of Registered Agent