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L0900003984

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
2013 SEP 11 PM 3:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. BOSTICK

SEP 12 2013

EXAMINER



ZORRILLA & ASSOCIATES, P.L.  
2600 DOUGLAS ROAD  
PENTHOUSE 10  
CORAL GABLES, FLORIDA 33134  
T: 305.379.7200  
F: 305.379.7009

August 26, 2013

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

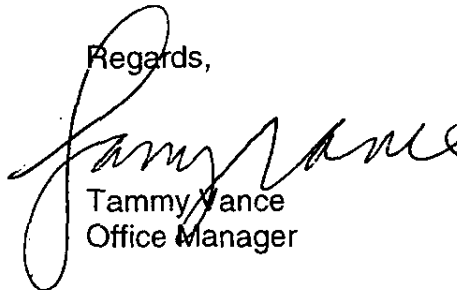
Re: Change of Address for Registered Agent

Please change our address per the enclosed forms and our check in the amount of \$165.00 for the following companies:

Nile Gardens	L09000035984	\$25.00
Fundacion Rescate Juridico	N05000006647	\$35.00
Behr Holdings, LTD.	F080000001819	\$35.00
First Equitable Realty III, Inc.	P95000004323	\$35.00
First Equitable Realty III, Ltd.	A95000000109	\$35.00

If you require any additional information, do not hesitate to contact me.

Regards,



Tammy Vance  
Office Manager

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2013 SEP 11 PM 3:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Enclosure

**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: Nile Gardens, LLC

2. (a) Principal office address of limited liability company: 4225 W. 16th Avenue  
(Note: **MUST BE STREET ADDRESS**) Hialeah, FL 33012

(b) Mailing address of limited liability company: 4225 W. 16th Avenue  
(Note: **MAY BE POST OFFICE BOX**) Hialeah, FL 33012

4/14/2009 L09000035984

3. Date of filing/registration in Florida 4. Document number

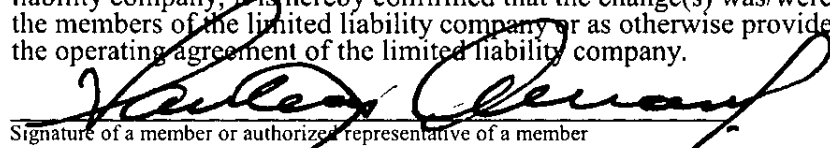
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: Zorrilla & Associates, P.L.  
Registered Office Address: 1401 Brickell Avenue  
Suite 570  
Miami, FL 33131

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

**NEW Registered Agent:** Juan C. Zorrilla, Esq.  
**NEW Registered Office Address:** 1825 Ponce de Leon Blvd., Suite 517  
(**MUST BE FLORIDA STREET ADDRESS**) Coral Gables, FL 33134

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.

  
Signature of a member or authorized representative of a member

Santiago Alvarez  
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. 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.

  
Signature of Registered Agent

August 24, 2013

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

FILING FEE: \$25.00