

L09000054785

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

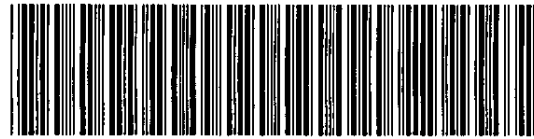
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

. Office Use Only

B. KOHR
OCT - 6 2009
EXAMINER



500159454595

FILED OF STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
09 OCT - 6 PM 2:51

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2009 OCT - 6 AM 10:41
NOT ISSUED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

B. KOHR
OCT - 6 2009
EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 146935 7729888

AUTHORIZATION :

COST LIMIT : \$ 25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 OCT -6 PM 2:57

ORDER DATE : October 6, 2009

ORDER TIME : 10:05 AM

ORDER NO. : 146935-010

CUSTOMER NO: 7729888

CHANGE OF AGENT

NAME: MIAMI PRO GROUP MANAGEMENT II,
LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Carina L. Dunlap -- EXT# 2951

EXAMINER: _____

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: Miami Pro Group Management II, LLC

2. (a) Principal office address of limited liability company: _____



(Note: **MUST BE STREET ADDRESS**)

3427 Norfolk Street
Pompano Beach, FL 33062

(b) Mailing address of limited liability company: _____



(Note: **MAY BE POST OFFICE BOX**)

3427 Norfolk Street
Pompano Beach, FL 33062

06/05/2009

L09000054785

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:

Edward Rappaport

Registered Office Address:

3427 Norfolk Street
Pompano Beach, FL 33062

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

NEW Registered Agent:

Corporation Service Company

NEW Registered Office Address:

(**MUST BE FLORIDA STREET ADDRESS**)

1201 Hays Street
Tallahassee, FL 32301-2525

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.

Edward Rappaport
Signature of a member or authorized representative of a member

Edward Rappaport

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. 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.

Canna L. Dunlap
Signature of Registered Agent

Canna L. Dunlap
Asst. Vice President

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

FILING FEE: \$25.00