

L09000114274

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(Address)

(Address)

(City/State/Zip/Phone #)

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AUG 23 2016

S. YOUNG

16 AUG 22 PM 4:55

SECRETARY OF STATE
FALLS CHURCH, VA 22044

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR
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: NORTH CITY CAMPONERS, LLC
2. (a) 3599 UNIV BLVD SUITE 907 (b) PO BOX 19919
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
- JACKSONVILLE, FL 32245 JACKSONVILLE, FL 32245

3. 12/1/2009 4. L 0900114274
Date of filing registration in Florida Document number

5. (a) SMITH HULSEY & BUSBY PA
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
225 WATERBURY STREET, SUITE 1800
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

JACKSONVILLE, FL 32202

- (b) SHYAM PARIYANT
Enter name of NEW Registered Agent and/or NEW Registered Office address:

3599 UNIV BLVD SUITE 907
NEW Registered Office Address:

JACKSONVILLE, FL 32216

JACKSONVILLE, FL 32216

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.

S.B. [Signature]
Signature of a member or authorized representative of a member

SHYAM B. PARIYANT
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 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.

S.B. [Signature]
Signature of Registered Agent

11/11/11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 AUG 22 PM 4: 55