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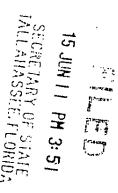
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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: H&C Cypress Terrace, LLC		
	e of Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	ce Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
Jennifer G. Sanchez, Esq.		
Name of Person		
Sanchez & Ashby, P.A.		
Firm/Company		
1223 White Street, Unit 104		
Address		
Key West, FL 33040		
City/State and Zip Code		
jgsanchez@bellsouth.net		
E-mail address: (to be used for future annu	nal report notification)	
For further information concerning this matter,	please call:	
Jennifer G. Sanchez	305 293-0084	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following	amount:	
☑ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy	
INHS18 (2/14)		

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.

2. (a)		(b)	Mailing address of limited liability company:
	Principal office address of limited liability compar (Note: MUST BE STREET ADDRESS)	ny:	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
•	4119 Massard Road		
	Fort Smith, AR 72903		
	12/30/2009	LO!	9000123236
3.	Date of filing/registration in Florida	4.	Document number
5. (a)			
	Registered Agent and Registered Office shown on the reco	ords of the Florida Dep	ot. of State:
-	Feldman Koenig Highsmith & Van Looi	n, P.A.	
	Registered Office Address (MUST RE FLORIDA ST	REET ADDRESS)	
•	3158 Northside Drive		
	Key West	_, _{FL} _33040	·
		, FL	ASE 📜 *
(b)	Jennifer G. Sanchez, Esq.		CARE D.
(-)	Enter name of NEW Registered Agent and/or NEW Reg	istered Office address	*
	Sanchez & Ashby, P.A.		SET O
	NEW Registered Office Address:		
	1223 White Street, Unit 104		STALE STALE
	Key West	, _{FL} 33040	7.
the cha agent v was/we	imited liability company is not organized under inge or changes are made, the Florida street addrevill be identical. Or, in the case of a Florida limere authorized by an affirmative vote of the menticles of organization or the operating agreement	ress of the registere lited liability composites of the limited of the limited liabi	ed office and the business office of the registered any, it is hereby confirmed that the change(s) I liability company or as otherwise provided in lity company.
Signa	ture of a member or authorized representative of a member		/id Curry Printed or typed name of signce
I here provisi the obl to meri	hy accept the appointment as registered agent a	nd agree to act in s	this capacity. I further agree to comply with the e of my duties, and I am familiar with and accept of 605, F.S. Or, if this document is being filed rm that the limited liability company has been