

L10000024412

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

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

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

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

☐ PICK-UP    ☐ WAIT    ☐ MAIL

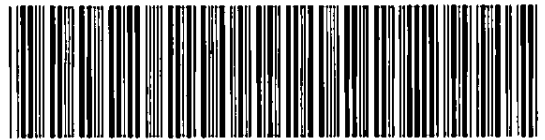
\_\_\_\_\_  
(Business Entity Name)

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

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U.S. DISTRICT COURT  
DISTRICT OF COLUMBIA

K. SALY  
NOV - 7 2017



**COGENCYGLOBAL**

115 N CALHOUN ST., STE. 4  
TALLAHASSEE, FL 32301  
**866.625.0838**  
COGENCYGLOBAL.COM

Account#: 120000000088

Date: 11/6/2017

Name: Merritt Knickle

Reference #: J003086

Entity Name: DHR FLORIDA I, LLC

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☒ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other \_\_\_\_\_

Authorized Amount: \$25

Signature: MHK

①CORPORATE HQ  
COGENCY GLOBAL INC.  
10 E 40 ST, 10 FL  
NY, NY 10016  
800.221.0102  
+1.212.947.7200

②EUROPEAN HQ  
COGENCY GLOBAL (UK) LIMITED  
REGISTERED IN ENGLAND & WALES  
REGISTRY 1401072  
6 BEVIS MARKS, 14 FL  
LONDON EC3A 7BA  
+44 (0)20.3786.1090

③ASIA PACIFIC HQ  
COGENCY GLOBAL (HK) LIMITED  
A HONG KONG LIMITED COMPANY  
INFINITUS PLAZA, 12TH FL  
195 DES VOEUX RD CENTRAL  
HONG KONG  
+852.3975.1803



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TALLAHASSEE, FL 32301  
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**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: DHR Florida I, LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jerry Abrams

Name of Person

Oasis Outsourcing

Firm/Company

2054 Vista Parkway, Suite 300

Address

West Palm Beach, FL 33411

City/State and Zip Code

Compliance@Oasisadvantage.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jerry Abrams

Name of Person

at ( 561 )

227-6500

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

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: DHR Florida I, LLC
2. (a) 3020 E. Camelback Road, Ste 213  
Principal office address of limited liability company:  
(Note: MUST BE STREET ADDRESS)  
Phoenix, AZ 85016
- (b) 2054 Vista Parkway, Suite 300  
Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)  
West Palm Beach, FL 33411
3. 03/02/2010  
Date of filing/registration in Florida
4. L10000024412  
~~L10000023883~~  
Document number

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

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1200 SOUTH PINE ISLAND ROAD

Plantation, FL 33324

- (b) COGENCY GLOBAL INC.  
Enter name of NEW Registered Agent and/or NEW Registered Office address:

115 North Calhoun Street, Suite 4

NEW Registered Office Address:

Tallahassee, FL 32301

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.

Terry Mayotte  
Signature of a member or authorized representative of a member

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.

Koehn Wall  
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314  
FILING FEE: \$25.00