

L10000038906

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

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2013 OCT -4 PM 4:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 07 2013

D. BRUCE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 19, 2013

LINDA BICKLEY
6531 PARK OF COMMERCE BLVD #180
BOCA RATON, FL 33487

SUBJECT: ASTRA REAL ESTATE LLC
Ref. Number: L10000038906

We have received your document for ASTRA REAL ESTATE LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please indicate your changes in part 5b.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 013A00022085

2013 OCT -4 PM 4:20
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ASTRA REAL Estate 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:

JHL Registered Agent LLC
Name of Person

Firm/Company

6531 Park of Commerce Blvd #180
Address

BOCA RATON FL 33487
City/State and Zip Code

jonathan.lehman@thelehmanfirm.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Linda Bickley at (561) 995 8887
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

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2010 OCT -4 PM 4:20
TALLAHASSEE, FLORIDA
CLERK OF THE COURT

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: ASTRA Real Estate LLC
2. (a) Principal office address of limited liability company: 6531 PARK of Commerce Blvd
Ste 180
BOCA RATON FL 33487
(Note: **MUST BE STREET ADDRESS**)
- (b) Mailing address of limited liability company: _____
(Note: **MAY BE POST OFFICE BOX**)

3. Date of filing/registration in Florida: 4/12/2010
4. Document number: L10000038906

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

Registered Agent:

JHL Registered Agent LLC

Registered Office Address:

6531 PARK of Commerce Blvd #180
BOCA RATON FL 33487

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

NEW Registered Agent:

NEW Registered Office Address:

(**MUST BE FLORIDA STREET ADDRESS**)

4660 N UNIVERSITY DR
LAUDERHILL FL 33311

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

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.

Signature of Registered Agent

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