L10000092893

(Requestor's Name)								
(Address)								
(Address)								
(City/State/Zip/Phone #)								
PICK-UP	☐ WAIT	MAIL						
(Business Entity Name)								
(Document Number)								
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COVER LETTER

	Registration Section Division of Corporations					
SUBJE	7110 BONITA DRIVE, LLC					
S C D C C		ted Liability Company				
Dear Sir	ir or Madam:					
The enc	closed Registered Agent/Registered Office Chang	e and fee(s) are submitted for filing.				
Please re	return all correspondence concerning this matter t	to the following:				
JEANE	ETTE R. BIBLIOWICZ					
	Name of Person					
7110 E	BONITA DRIVE, LLC					
	Firm/Company					
20200) W DIXIE HIGHWAY, STE 1204					
	Address					
МІАМІ	I, FL 33180					
	City/State and Zip Code					
JEANE	ETTE@HSMLOANS.COM					
E-1	-mail address: (to be used for future annual report	notification)				
For furth	ther information concerning this matter, please ca	II:				
JEANE	ETTE R. BIBLIOWICZ 30	5 867-2274				
	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:						
1	■ \$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.

1. Na	ame of the limited liability company: 7110 BO	NITA D	RIVE	E, LLC				
2. (a)	20200 W DIXIE HIGHWAY, STE 1204		(b)	20200 V	W DIXIE HI	GHWAY,	STE 1	204
-· ()	Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)	ny:	(0)		Mailing address of (Note: MAY I		-	
	MIAMI, FL 33180			MIAMI,	FL 33180			
	09/30/2010		ı	L100000	92893			
3.	Date of filing/registration in Florida		ļ.		Document no	umber		
5. (a)	JEANETTE R. BIBLIOWICZ							
()	Registered Agent and Registered Office shown on the reco	rds of the F	lorida	Dept. of State	- e:			
	19950 W COUNTRY CLUB DR, #906							
	Registered Office Address (MUST BE FLORIDA STR	REET ADD.	RESS)		_			
	AVENTURA	33	180		<u>-</u>			
(b)	JEANETTE R. BIBLIOWICZ				_	28	,	
	Enter name of NEW Registered Agent and/or NEW Regi	stered Offi	ce add	ress:		, [_;		•
	20200 W DIXIE HIGHWAY, STE 1204	1204					S.	
	NEW Registered Office Address:				-		4 PM 12:	1
	MIAMI	, _{FL} 33	180		-	SEU	12:24	Production of the second of th
					<u>.</u>			_
the cha agent w was/we	imited liability company is not organized under the street address or changes are made, the Florida street address vill be identical. Or, in the case of a Florida limber authorized by an affirmative vote of the members of organization or the operating agreement of the organization or the operating agreement of the op	ess of the ted liabili bers of the	regist ty cor e limi	tered office mpany, it is ted liabilit	e and the busi s hereby confi y company or	ness office irmed that	e of the t the char	registered nge(s)
		_	<u> 2</u>	eant.	Printed or type) Web	<u> B.Ll</u>	س <u>ب ۽ ي نه (</u>
~~	ure of a member or authorized representative of a member							
I here provisi the obl to mere notified	by accept the appointment as registered agent an ons of all statutes relative to the proper and comingations of my position as registered agent as pricely reflect a change in the registered office address of this change.	nd agree to plete perj ovided for ss, I here	o act forma r in C by co	in this cape ince of my hapter 605 nfirm that	acity. I furthe duties, and I d 5, F.S. Or, if t the limited lid	er agree to am familia his docum ability com	comply r with a ent is be pany ha	with the nd accept ging filed as been
Signatu	re of Registered Agent	_						

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