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(Requestor's Name)				
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PICK-UP WAIT MAIL				
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## **COVER LETTER**

	Registration Section Division of Corporations			
SUBJECT: Name		HCM Properties LLC of Limited Liability Company		
D 0'	N. 1	• • •		
Dear Si	r or Madam:			
The end	closed Registered Agent/Registered	d Office Change and fee(s) are submitted for filing.		
Please i	return all correspondence concernin	ng this matter to the following:		
	Charlene Hovey			
	Name of Person			
	HCM Properties LLC			
	Firm/Company	<del>.</del>		
	4020 SW 2 St	SECRETARY OF STATE ALLAHASSEE, FLORID		
	Address	ASSE		
	Plantation, Fl. 33317			
	City/State and Zip Code	LOAII:		
E-m	charlene.hovey@comcast.	, 🕦 —		
For furt	her information concerning this ma	atter, please call:		
······································	Charlene Hovey	at ( <u>954</u> ) <u>540-4043</u>		
	Name of Person	Area Code & Daytime Telephone Number		
	STREET/COURIER ADDRESS:	MAILING ADDRESS:		
	Registration Section	Registration Section		
	Division of Corporations	Division of Corporations P.O. Box 6327		
Clifton Building 2661 Executive Center Circle		Tallahassee, Florida 32314		
	Tallahassee, Florida 32301	runanassee, 1 lorida 52514		
]	Enclosed is a check for the follow	ing amount:		
ſ,	7 \$25 Filing Fee	\$55 Filing Fee & Certified Copy		

TO:

## 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. 1	Name of the limited liability company:	HCM Properties LL	.C	
2. (	(a) Principal office address of limited liability company	4020 SW 2 St		
	(Note: MUST BE STREET ADDRESS)	Plantation , Fl 33317		
(	(b) Mailing address of limited liability company:	4020 SW 2 St		
	(Note: MAY BE POST OFFICE BOX)	Plantation, Fl 33317		
	12/20/11	L10000130	)109	
3. I	Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of				
	Registered Agent:	Corporate Creations	7201 741.	
	Registered Office Address:	11380 Prosperity Rd #2 E Palm Beach Gardens	2215 = 1 6 El 733460 = 1	
(	(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :  NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	V Registered Office addr Charlene Hovey 4020 SW 2 St	OF STATE	
	MCGI BE I BONIEN STREET NEED NEEDS	Plantation	"FL <u>33317</u>	
con and liab of t or t	the limited liability company is not organized under the lafirmed that after the change or changes are made, the Flathe business office of the registered agent will be identically company, it is hereby confirmed that the change(s) he members of the limited liability company or as other he operating agreement of the limited liability company	orida street address of the	registered office	
	Charlene Hovey			
Prin	ated or typed name of signee	-		
I he con and Cha ada	ereby accept the appointment as registered agent and apply with the provisions of all statutes relative to the provisions of all statutes relative to the provident of the provident of the provident of the provident of the provident is being filed to mention that the limited liability company with the liability company with the liability company with the limited liability company with the liability wit	gree to act in this capacity per and complete perform ition as registered agent a rely reflect a change in the has been notified in writin	. I further agree to ance of my duties, is provided for in registered office ng of this change.	
Sigr	nature of Registered Agent			

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