L110000008059

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

Office Use Only



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07/10/14--01004--005 **35.00

SECRETARY OF STATE STATE OF CREPORATION

C. LEVIS

AUG 15 2014

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 24, 2014

JENNIFER JACON / GREEN REALTY PARTNERS LLC 10097 CLEARY BLVD #155 PLANTATION, FL 33324 US

SUBJECT: GREEN REALTY PARTNERS LLC

Ref. Number: L11000008059

We have received your document for GREEN REALTY PARTNERS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a ALIEN BUSINESS ORGANIZATION, but your entity is a FLORIDA LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 714A00015936

COVER LETTER

TO: Registration Section

	Division of Corporations							
SUBJE								
	Name of Limited Liability Company							
Dear Sir	r or Madam:							
The enc	losed Registered Agent/Registered Offi	ce Change and	fee(s) are submitted for filing.					
Please re	eturn all correspondence concerning thi	s matter to the f	following:					
	Jennifer Jacon							
	Name of Person							
	Green Realty Partners	LLC						
	Firm/Company							
	10097 Cleary Blvd., #155							
	Address							
	Plantation, FL 33324		. <u></u>					
	City/State and Zip Code							
E-	nigel.alston@gmail.com mail address: (to be used for future ann	ual report notif	ication)					
For furt	ther information concerning this matter,	please call:						
	Jennifer Jacon	at (<u>954</u>) 533-6406					
	Name of Person		Area Code & Daytime Telephone Numbe					
	STREET/COURIER ADDRESS:	M	AILING ADDRESS:					
	Registration Section		gistration Section					
	Division of Corporations		vision of Corporations					
	Clifton Building		D. Box 6327					
	2661 Executive Center Circle Tallahassee, Florida 32301	Ta	llahassee, Florida 32314					
	Enclosed is a check for the following amount:							
	□ \$25 Filing Fee	□ \$5	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	me of the limited liability company:Green Rea	alty Pa	rtners, LLC	
2. (a)	1500 Cordova Rd #212, Ft. Lauderdale, FL 333 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	16	(b) <u>1009</u>	Processing
3.	January 20, 2011 Date of filing/registration in Florida		4.	L11000008059 Document number
J.			٦.	- Document Intinoer
5. (a)				
	Registered Agent and Registered Office shown on the records	s of the	Florida Dept. o	f State:
	10097 Cleary Blvd. #155			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
			00004	
	<u>Plantation</u> ,	, FL	33324	- 35
	AP LALA			
(b)	Nigel Alston Enter name of NEW Registered Agent and/or NEW Registered	! ()(Tine ouldware:	
	enter name of NEW Registered Agent and/or NEW Registe	ereu (VI	nce aduress:	- 20° - 100° - 100°
				AM II: 25
	10097 Cleary Blvd. #155			
	NEW Registered Office Address:			-6 AM 11: 25
				
	Plantation	, FL	33324	
the ch agent was/w the ar	limited liability company is not organized under the ange or changes are made, the Florida street addres will be identical. Or, in the case of a Florida limite ere authorized by an affirmative vote of the membericles of organization or the operating agreement of	s of the diabi	e registered lity compan he limited li	office and the business office of the registered y, it is hereby confirmed that the change(s) ability company or as otherwise provided in
	ature of a member or authorized representative of a member			Jose Falcon
Sign	ature of a member or authorized representative of a member			Printed or typed *** { signee
Signa	sture of new registered againt, if applicable:		• •	noite
I her	eby accept the appointment as registered agent.]	- I am fa	amiliar with	and accept the
oblig	rations of section 600.0500, Florida Statutes.			
	///////			
	// <i>U//</i>			
/-	(Registered agent accepting appointment)			
1				·

INHS18 (2/14)