#11000038200

(Requestor's Name)				
(Address)				
	dress)			
(Cit	y/State/Zip/Phone	= #)		
PICK-UP	☐ WAIT	MAIL.		
/Bu	siness Entity Nan	ne)		
(Business Entity Name)				
(Do	cument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			
:				

Office Use Only



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SECRETARY OF STATE
ALL AHASSEE FLORIDA

K.SALY EXAMINER JAN 25 2012

COVER LETTER

TO: Registration Section Division of Corporations				
2. Violon of Corporations	,			
SUBJECT:	NEW TERRITORY REALTY, LLC			
	Name of Limited Liability Company			
Dear Sir or Madam:				
Dear on or Madain.				
The enclosed Registered Agent/	Registered Office Change and fee(s) are submitted for filing.			
Please return all correspondence	concerning this matter to the following:			
DIEGO M. P				
Name of Pers	son			
NEW TERRITORY	REALTY, LLC			
Firm/Compa	пу			
2385 NW EXECUTIVE CE	NTER DR SUITE 100			
Address				
BOCA RATON	, FL 33431			
City/State and Zi	p Code			
NEWTERRITORYREAI E-mail address: (to be used for future	LTY@GMAIL.COM			
For further information concerni	ng this matter, please call:			
DIEGO M. PEREIR				
Name of Person	Area Code & Daytime Telephone Number			
STREET/COURIER ADI	DRESS: MAILING ADDRESS:			
Registration Section	*			
	Division of Corporations Division of Corporations Division of Corporations			
Clifton Building	——————————————————————————————————————			
2661 Executive Center Circ Tallahassee, Florida 32301	cle Tallahassee, Florida 32314			
Enclosed is a check for the following amount:				
\$25 Filing Fee	\$55 Filing Fee & Certified Copy			
INHS18 (5/08)				

DATE FOR I REMED I THREE OF REGISTERED OFFICE OF REGISTERED RUBBLE OF

R	OTH	FOR	IMITED	LIABILITY	COMPAN	V
23	V/III	IUN				

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:NEV	V TERRITORY REALTY, LLC			
2. (a) Principal office address of limited liability company	2385 NW Executive Center Dr.			
(Note: MUST BE STREET ADDRESS)	Suite 100 Boca Raton, FL 33431			
(b) Mailing address of limited liability company:	2385 NW Executive Center Dr.			
(Note: MAY BE POST OFFICE BOX)	Suite 100 Boca Raton, FL 33431			
03/30/2011	L11000038200			
3. 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 State:			
Registered Agent:	WANDA CAMACHO			
Registered Office Address:	2385 NW Executive Center Dr. Suite 100 Boca Raton, FL 33431			
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address. NEW Registered Agent: DIEGO M. PEREIRA				
NEW Registered Agent:				
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2385 NW Executive Center Suite 100 Boca Raton ,F 83431			
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 of authorized representative of a member				
DIEGO M. PEREIRA Printed or typed name of signee	-			
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the proving and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to me address, I hereby configm that the limited liability company	gree to act in this capacity. I further agree to per and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office 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

INHS18 (05/08)