

L11000072116

(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



100244488461

RECEIVED
DEPT. OF STATE
13 MAR 14 PM 2:29

FILED
13 MAR 14 AM 10:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR 15 2013

G. McLEOD



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 569591 4724048

AUTHORIZATION :

COST LIMIT : \$ 25.00

[Handwritten signature]

ORDER DATE : March 13, 2013

ORDER TIME : 11:0 AM

ORDER NO. : 569591-020

CUSTOMER NO: 4724048

CHANGE OF AGENT

NAME: PHBH, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Susie Knight -- EXT# 52956

EXAMINER: _____

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: PHBH LLC

2. (a) Principal office address of limited liability company: 4362 NORTHLAKE BLVD.
(Note: **MUST BE STREET ADDRESS**) Suite 109
PALM BEACH GARDENS FL 33410

(b) Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**) _____

06/21/2011

L11000072116

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: VCORP SERVICES, LLC


Registered Office Address: 5011 SOUTH STATE ROAD 7, SUITE 106
DAVIE FL 33314

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

NEW Registered Agent: Corporation Service Company

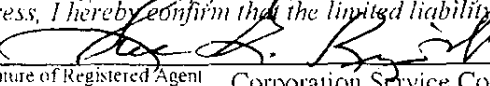
NEW Registered Office Address: 1201 Hays Street
(**MUST BE FLORIDA STREET ADDRESS**) Tallahassee, FL 32301

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

Adam J. Schreiber, ~~MEMBER~~
Printed or typed name of signer

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.

By: 
Signature of Registered Agent **Sue G. Knight**
Corporation Service Company Assistant Vice President
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00

FILED
13 MAR 14 AM 10:24
TALLAHASSEE, FLORIDA