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SECREMARY OF STATE
TABLAHASSEE, FLORIDA

COVER LETTER

TO: Regis

Registration Section
Division of Corporations

SUBJECT: Cypress II Holding Company, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Elizabeth H. Masarek

Name of Person

Cypress II Holding Company, LLC

Firm/Company

5511 N. University Drive, Suite 104

Address

Coral Springs, FL 33067

City/State and Zip Code

bjbgator84@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Elizabeth H. Masarek

...954

335-9220

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:

■ \$25 Filing Fee

□ \$55 Filing Fee & Certified Copy

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: Cypress II Holding C	Company, LLC	
2. (a) Principal office address of limited liability compa		
(Note: MUST BE STREET ADDRESS)	Suite 104	الم المساور ال
	Coral Springs, FL 33067	(P) 12 12 12 12 12 12 12 12 12 12 12 12 12
(b) Mailing address of limited liability company:	5511 N. University Drive	2 1
(Note: MAY BE POST OFFICE BOX)	Suite 104	30 7H
	Coral Springs, FL 33067	The F
		بي الم
09/26/2011	L11000110030	3.
3. Date of filing/registration in Florida	4. Document number	3
5. (a) Registered Agent and Registered Office shown o Registered Agent:	n the records of the Florida	Dept. of State:
		<u></u>
Registered Office Address:	7510 Brigantine Lane	_
-	Parkland, FL 33067	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>		dress:
NEW Registered Agent:	Elizabeth H. Masarek	
NEW Registered Office Address:	5511 N. University Drive	•
(MUST BE FLORIDA STREET ADDRESS)	Suite 104	
(MOST DE LEORIDA STREET ADDRESS)	Coral Springs	FL 33067
YO. 4. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ide liability company, it is hereby confirmed that the change (the members of the limited liability company or as otherwise the operating agreement of the limited liability company. Signature of member or authorized representative of a member	Florida street address of the ntical. Or, in the case of a s) was/were authorized by vise provided in the article	e registered office Florida limited an affirmative vote of
Elizabeth H. Masarek		
Printed or typed name of signee		

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.

Signature of prisoned Macarel

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