

**L11000137227**

\_\_\_\_\_  
(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



000292867960

12/05/16--01034--012 \*\*55.00

2016 DEC -5 P 3:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FILED**

**S Warren**  
DEC 06 2016

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 295 South Atlantic, 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:

Walter Galdenzi  
\_\_\_\_\_  
Name of Person

295 South Atlantic, LLC  
\_\_\_\_\_  
Firm/Company

5625 Cypress Creek Parkway, Suite 500  
\_\_\_\_\_  
Address

Houston, TX 77069  
\_\_\_\_\_  
City/State and Zip Code

sgaldenzi@aol.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Susan Galdenzi at ( 281 ) 893-1542  
\_\_\_\_\_  
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 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. Name of the limited liability company: 295 SOUTH ATLANTIC, LLC

2. (a) <u>295 South Atlantic, LLC</u> Principal office address of limited liability company: <i>(Note: MUST BE STREET ADDRESS)</i> <u>295 South Atlantic Avenue</u> <u>Ormond Beach, FL 32176</u>	(b) <u>295 South Atlantic, LLC</u> Mailing address of limited liability company: <i>(Note: MAY BE POST OFFICE BOX)</i> <u>5625 Cypress Creek Parkway, Suite 500</u> <u>Houston, TX 77069</u>
---	--

3. <u>December 6, 2011</u> Date of filing/registration in Florida	4. <u>L11000137227</u> Document number
--	---

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Singh, Sunny  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
295 South Atlantic Avenue  
Ormond Beach, FL 32176

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

Susan Galdenzi  
NEW Registered Office Address:  
295 South Atlantic Avenue  
Ormond Beach, FL 32176

2015 DEC -5 P 3:20  
 FILED  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

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

Walter Galdenzi  
 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 605, 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 Registered Agent