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| Special Instructions to I | Filing Officer: | |
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> SECRETARY OF STATE TALLAHASSEE, FLORIDA

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COVER LETTER

| TO: Registration Section Division of Corporations | | |
|--|---|--|
| Collier & Associates Real Est | tate of Tampa, LLC | |
| | of Limited Liability Company | |
| Dear Sir or Madam: | | |
| The enclosed Registered Agent/Registered Offic | e Change and fee(s) are submitted for filing. | |
| Please return all correspondence concerning this | matter to the following: | |
| Cary Collier | | |
| Name of Person | | |
| Collier & Associates Real Estate of Tam | pa, LLC | |
| Firm/Company | | |
| 1500 W. Platt St. | | |
| Address | | |
| Tampa, Florida 33606 | | |
| City/State and Zip Code | | |
| cary@carycollier.com | | |
| E-mail address: (to be used for future annu | al report notification) | |
| For further information concerning this matter, p | please call: | |
| Cary Collier | 813 435-1000 | |
| 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 a | amount: | |
| △ \$25 Filing Fee | \$55 Filing Fee & Certified Copy | |
| NHS18 (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 | ame of the limited liability company: Collier & Ass | ociates Real Est | ate, LLC | | |
|------------------------------|--|--|---|---|--------------------------|
| 2. (a) | 1500 W. Platt St. Tampa, FL 33606 | (b) P.O. Box 320044 Tampa, FL 33679 | | | |
| - () | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | | | |
| | 04/09/2012 | L120000 | 48204 | | |
| 3. | Date of filing/registration in Florida | 4. | Document number | | |
| 5. (a) | Cary Collier | ·-··· | _ | | |
| | Registered Agent and Registered Office shown on the records of | f the Florida Dept. of Sta | te: | 15 17 17 18 18 | |
| | Registered Office Address (MUST BE FLORIDA STREET | ADDRESS) | | | |
| | 234 E Davis Blvd | · · · · · · · · · · · · · · · · · · · | | ASS | |
| | Tampa . FI | 33606 | _ | | |
| | Cary Collier | | - | 1 3: 44 F STATE FLORID, | |
| (b) | Enter name of NEW Registered Agent and/or NEW Registered | d Office address: | - | P V V V | |
| | Line hanc of NEW Registered Agent and/or NEW Registered | orite address. | | | |
| | NEW Registered Office Address: | · · · · · · · · · · · · · · · · · · · | _ | | |
| | 1500 W. Platt St. | | | | |
| | 1000 11.1 late 01. | | _ | | |
| | Tampa , Fl | L 33606 | | | |
| the cha agent v was/we | imited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited I ere authorized by an aftirmative vote of the members cless of organization of the operating agreement of the | of the registered office iability company, it of the limited liabili | ce and the business offi is hereby confirmed the ty company or as other mpany. | ice of the registe at the change(s) | ered) |
| Signa | ture of a member or authorized representative of a member | | Printed or typed name of | signee | |
| provisi the obl to mer | by accept the appointment as registered agent and agions of all statutes relative to the proper and complete lightons of my positioneds registered agent as provide light a change if the registered office address, I d in writing of this change. | ree to act in this cap e performance of my ed for in Chapter 60 hereby confirm that | pacity. I further agree duties, and I am famil 5, F.S. Or, if this doci t the limited liability co | to comply with liar with and ac iment is being fi impany has bee | the cept iled n |
| Signatu | ne of Registered Agent | | | | |