L12000086944

(Requestor's Name)	
(Address)	
(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:	

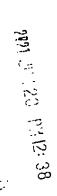
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U6/29/21--U1825--U23 **25.88



COVER LETTER

TO:	Registration Section
	Division of Corporations

Ine Flagler Development ddc 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:

ouise Jaffe
Name of Person

lidgard Management

1475 W. Cypress Creek Rd. * 202

Ft- danderde FL. 33309 City/State and Zip Code

Lofte 2 midgardmanagement - Com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ouise Jaffe at (954) 640.0233

Area Code & Daytime Telephone Number

3

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: -

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Enclosed is a check for the following amount:

\$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

INHS18 (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. Name of the limited liability company: Qne Flagler Deve	dopment ddC
2. (a) 1475 W. Cypress Creek Rd. Principal office address of limited liability company: Mailing address	· · · · · · · · · · · · · · · · · · ·
	02 derdale FC.3330
6.29.2012 /120000	>86944
 Date of filing/registration in Florida 4. Document (a) Cliff Hertz Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 	t number
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	. ~2
West Palm Beach FL 33401	2021 JU 28
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:	8 P. 12:
360 South Rosemary NEW Registered Office Address:	(a)
Suite 1410	
West Palm Beach FL 33401 If the limited liability company is not organized under the laws of the State of Florida, it is high an arrange of the state of Florida.	creby confirmed that after the
change or changes are made, the Florida street address of the registered office and the busine agent will be identical. Or, in the case of a Florida limited liability company, it is hereby corwas/were authorized by an affirmative vote of the members of the limited liability company the articles of organization or the operating agreement of the limited liability company.	nfirmed that the change(s)

Signature of a member or authorized descentative of a member

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