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## **COVER-LETTER**

Division of Corporations							
SUBJECT: Anchor Inn Associates,	Anchor Inn Associates, LLC						
	Name of Limited Liability Company						
Dear Sir or Madam:							
The enclosed Registered Agent/Registered	d Office Change and fee(s) are submitted for filing.						
Please return all correspondence concerni	ng this matter to the following:						
Bernard Marcus							
Name of Person							
Firm/Company							
2511 NW 7th Street							
Address							
Boynton Beach, FL 33426							
City/State and Zip C	ode						
bmarcus48@gmail.com							
E-mail address: (to be used for future	re annual report notification)						
For further information concerning this m	natter, please call:						
Bernard Marcus	at () 667-5070						
Name of Person	Area Code & Daytime Telephone Number						
STREET/COURIER ADDRES Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	S: MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314						
Enclosed is a check for the follo	owing amount:						
☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy						

**TO:** Registration Section

## 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:  Anchor Inn As	ssocia	tes,	LLC	_	
2. (a)	2411 Floral Road	(b) 2511 NW 7th Street				
2. (u)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	`	, <u> </u>	N	_	of limited liability company:  BE POST OFFICE BOX)
	Boynton Beach, FL 33462	_	_ _	oynton	Beach, Fl	_ 33426
	7/23/12		_ L1	200009	5096	
3.	Date of filing/registration in Florida	4.		-	Document r	number
5. (a)	Manella, Ross H. Esq.					
, ,	Registered Agent and Registered Office shown on the records of the Florida Dept. of State  1 East Broward Blvd.				:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  Suite 1010					MINDEC -3 F
	Fort Lauderdale	3330	1			是是一
(b)	Bernard Marcus					
	Enter name of NEW Registered Agent and/or NEW Registered Office address:					
	2511 NW 7th Street					FILEU 3: 53
	NEW Registered Office Address:					<del>1</del>
	Boynton Beach . FI.	33420	6			
the cha agent v was/w	imited liability company is not organized under the lavange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members cicles of organization of the operating agreement of the	`the reg ability of the li	gister comp mite	red office pany, it is d liability	and the bus hereby con company c	siness office of the registered ifirmed that the change(s)
	Buyanter	_	R	CANA	ag m	ARCUS sed name of signee
_	dure of a member or authorized representative of a member					
provisa the obta to mer	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide elv reflect a change in the registered office address. I din priting of this change.	ree to a perform d for in hereby	ct in mana t Cha conf	this cape se of my c upter 605, irm that t	icity. I furth luties, and I , F.S. Or, if the limited I	her agree to comply with the am familiar with and accept this document is being filed iability company has been
Signati	ire of Registered Agent					