## 112000/07893

(Requestor's Name)					
. (Address)					
(Address)					
(Cit	ty/State/Zip/Phone	#)			
PICK-UP	☐ WAIT	MAIL			
(Bu	usiness Entity Nam	ne)			
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					
		i			

Office Use Only



600323893596

M/81/19--01007--014 \*\*25.00

7019 JAN 31 PH 12: 40

RAROCHS

FEB 0.9 2019 - ALREITTON

## COVER LETTER

Division of Corporations	*					
Harbour 1030 LLC						
Name of Limited Liability Company						
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter	to the following:					
Charles Zamorski						
Name of Person						
Charles Zamorski, Inc.						
Firm/Company						
166 West Washington, Suite 340						
Address						
Chicago, Illinois 60602-2390						
City/State and Zip Code	<del></del>					
chuck@czamorski.com						
E-mail address: (to be used for future annual repor	t notification)					
For further information concerning this matter, please ca	all:					
Charles Zamorski 31	2 578-0122					
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.	Na	ame of the limited liability company:	1030 LLC		
2. (a)		Harbour 1030 LLC / Attn: Dora Kravetz		(b) Charles Zamorski, Inc.	
2. (a)	,	Principal office address of limited liability compar ( <u>Note: MUST BE STREET ADDRESS</u> )		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)	
		10275 Collins Avenue, #1030		166 Wes	st Washington, Suite 340
•	Bal Harbour, FL 33154-1423		Chicago, Illinois 60602-2390		
•		8/22/2012		L1200010	07893
3.		Date of filing/registration in Florida	4.	-	Document number
5. (	a)	Guzman & Guzman PA			
٠. (	aj	Registered Agent and Registered Office shown on the reco	ords of the Flori	da Dept. of State	e:
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 9130 S Dadeland Blvd, Suite 1509			-
		Miami	, <sub>FL</sub> 33156	6	- 
(1	5)	Dora Kravetz			
. ``	- /	Enter name of NEW Registered Agent and/or NEW Registered Office address:		<u> </u>	
		Harbour 1030 LLC			EILED PHIE: LO
		NEW Registered Office Address:			2: 4
		10275 Collins Avenue, #1030			
		Bal Harbour	FL_33154	1-1423	_
sign the a Sign I he province to m	cha it v wci wrti gnat reli sisi reli sisi erc	imited liability company is not organized under tange or changes are made, the Florida street addrivill be identical. Or, in the case of a Florida limitere authorized by an affirmative vote of the memories of organization or the operating agreement of the memory of a member of a member of a member of all statutes relative to the proper and configutions of my position as registered agent as prely reflect a change in the registered office address of this change.	ess of the reg ted liability of bers of the li of the limited Do	gistered office company, it is mited liability liability con ora Kravetz	e and the business office of the registered is hereby confirmed that the change(s) y company or as otherwise provided in an analyst the printed or typed name of signce active. I further agree to comply with the

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