L12000145536

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COVER LETTER

TO:	Registration Section Division of Corporations							
SUBJI	Nolan Properties, LLC							
Name of Limited Liability Company								
Dear S	ir 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:								
Micha	ael E. Nolan							
	Name of Person		-					
Nolan	n Properties LLC							
	Firm/Company		-					
30 E i	Riverside Drive							
	Address							
Jupite	er, FL 33469		_					
	City/State and Zip Code							
•	es@teampbs.com		_					
Е	E-mail address: (to be used for future annual r	eport notifica	ation)					
For fur	rther information concerning this matter, plea	se call:						
Barba	ara James		832-6727 ext 1609					
	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	Regis Dívis P.O.	LING ADDRESS: stration Section sion of Corporations Box 6327 hassee, Florida 32314					
Enclosed is a check for the following amount:								
	□ \$25 Filing Fee	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.	Na	ame of the limited liability company: Nolan Properti	es LL	_C			
2.		30 E Riverside Drive	('b)	30 E Riv	rerside Drive	
2.	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ '	.~,		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		Jupiter, FL 33469	_	-	Jupiter, I	FL 33469	
		11/19/2012		L	1200014	1 5536	
3.		Date of filing/registration in Florida	4.			Document number	
5	(a)	Nolan Properties LLC					
(-	(/	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 4575 SE Dixie Highway			Dept. of State	- ::	
		Registered Office Address (MUST BE FLORIDA STREET AL	DDRES	DRESS) ALCO			
(b)		Stuart , FL	34997	7		2018 APR 30 SEURE PARSEL	
	(b)	Michael E. Nolan					
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office a	<u>ddr</u>	<u>ess</u> :	\$25 St D	
		30 E Riverside Drive				0, 2	
		NEW Registered Office Address:					
		Jupiter , FL	33469)		• •	
the age was	cha nt v s/wc	imited liability company is not organized under the law- inge or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of celes of organization or the operating agreement of the li	he reg pility of the lir	iste con mit	ered office ipany, it is ed liability	and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in	
Barbara Ja				ara Jam	es		
S	gnai	fure of a member or authorized representative of a member				Printed or typed name of signee	
pro the to r	visi obli nere	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I hi d'in writing of this change.	e to ac erforn for in ereby c	ct ii nar Ch con	n this cape ace of my e apter 605 aftrm that	acity. I further agree to comply with the duties, and I am familiar with and accept F.S. Or, if this document is being filed the limited liability company has been	

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

Signature of Registered Agent