

L130000012968

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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EXAMINER

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FINKEL WHITEFIELD SELIK

October 28, 2013

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

RE: Harris Family Properties LLC

Dear Sir/Madam:

Enclosed for filing is a Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company for the above referenced LLC. Also enclosed is our check in the amount of \$25 for the filing.

Please process this accordingly.

If you have any questions or need any additional information, please do not hesitate to contact our office.

Very truly yours,

FINKEL WHITEFIELD SELIK

Alan J. Ferrara

AJF/lcf/Enclosures

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FINKEL WHITEFIELD SELIK

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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: Harris Family Properties LLC

2. (a) Principal office address of limited liability company: 17 Fairview Court
Clarendon Hills, IL 60514
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company: 17 Fairview Court
Clarendon Hills, IL 60514
(Note: MAY BE POST OFFICE BOX)

January 25, 2013

L13000012968

3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

William Buczek

Registered Office Address:

4190 Las Palmas Way
Sarasota, FL 34738

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent:

Terry E. Harris

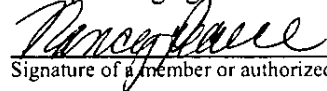
NEW Registered Office Address:

1340 Middle Gulf Drive Unit 6B

(MUST BE FLORIDA STREET ADDRESS)

Sanibel, FL 33957

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.



Signature of a member or authorized representative of a member

Nancy Pearce

Printed or typed name of signee

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 608, 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

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

FILING FEE: \$25.00