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TO: Registration Section

. Division of Corporations

URBAN CAPITAL REALTY LLC

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:

JAMES SAADA

Name of Person

URBAN CAPITAL REALTY LLC

Firm/Company

2025 Tyler st

Address

Hollywood, Florida 33020

City State and Zip Code

jimmysaada@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JAM	ES SAADA	954 558-3222 at ()
	Name of Person	Area Code & Daytime Telephone Num
	STREET/COURIER ADDRESS:	MAILING ADDRESS:
	Registration Section	Registration Section
	Division of Corporations	Division of Corporations
	Clifton Building	P.O. Box 6327
	2661 Executive Center Circle	Tallahassee, Florida 32314
	Tallahassee, Florida 32301	

□ \$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. N	ame of the limited liability company: URBAN CAPI	TAL REA	ALTY	LLC	
2. (a)				Tyler ST Hollywood, FI 33020	
2. (4,	Principal office address of limited liability company: (<i>Note: MUST BE <u>STREET ADDRESS</u></i>)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
3. 5. (a	<u>Aprel 15, 2013</u> Date of filing/registration in Florida 2330 NE 2 ave Miami FL 33137	 4	L	1300055048 Document number	
2. (a	Registered Agent and Registered Office shown on the records of the 2330 NE 2 ave Miami FL 33137	he Florida D	ept. of S	itate:	
	Registered Office Address (MUST BE FLORIDA STREET A	<u>DDRESS)</u>	·		
	, FL_			TILLED SECINE ANY OF SHATE STALLAHASSEE, FL	
(b	James Saada			ASS I A	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u> 2025 Tyler ST Hollywood, FI 33020	Office addro	<u>288</u> 1	E. FL E. FL	
	<u>NEW</u> Registered Office Address:				
	, FL_				
the cl agent was v	limited liability company is not organized under the law nange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia vere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the l	the registe bility com f the limite	red off pany, i ed liabi bility e	ice and the business office of the registered t is hereby confirmed that the change(s) lity company or as otherwise provided in ompany.	
Sign	while wameniber or authorized representative of a member			Printed or typed name of signee	
provi. the ol to me	eby accept the appointment as registered agent and agre- sions of all statutes relative to the proper and complete j bligations of my position as registered agent as provided rely reflectual change in the registered office address, I h ed in writing of this change	performan Hör in Ch	ce of n aptèr f	w duties, and I am familiar with and accept 505. F.S. Or. it this document is being tiled	
Signat	ture of Registered Agent				
C	Division of Corporations• P.O. B	ox 6327•	Tallal	nassee, FL 32314	

FILING FEE: \$25.00