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SHARREN

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT:DOHERTY APPLE FLORIDA, LI	LC				
Name of I	Limited Liability Company				
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office Cl	hange and fee(s) are submitted for filing.				
Please return all correspondence concerning this mat	tter to the following:				
Zena Serrano					
Name of Person					
Doherty Enterprises, Inc.					
Firm/Company					
7 Pearl Court					
Address					
Allendale, NJ 07401					
City/State and Zip Code					
zserrano@dohertyinc.com					
E-mail address: (to be used for future annual re	eport notification)				
For further information concerning this matter, pleas	se call:				
Zena Serrano	201 818-4669 ext. 1105				
Name of Person	Area Code & Daytime Telephone Number				
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 32301	Tallahassee, Florida 32314				
Enclosed is a check for the following amount:					
■ \$25 Filing Fee	□ \$55 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	me of the limited liability company: DOHERTY AP	PLE FL	ORIDA,	LLC		
2.	(a)	c/o Doherty Enterprises, Inc.	(b) c/o Doherty Enterprises, Inc.				
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
		7 Pearl Court		7 Pearl (Court		
		Allendale, NJ 07401		Allendal	e, NJ 07401		
		April 22, 2013	L13000058499				
3.		Date of filing/registration in Florida	4.		Document nur	nber	
5.	(a)						
	` '	Registered Agent and Registered Office shown on the records of the	ne Florida [Dept. of State	!:		
		Northwest Registered Agent, Inc.					
		Registered Office Address (MUST BE FLORIDA STREET A	•				
		3030 N. Rocky Point Drive, Suite 150A				25	
		Tampa , FL	33607			511 kay 1818	ET ACCEPTANCE OF THE PROPERTY
					ASSA Yaka	10	
	(b)	Enter name of NEW Registered Agent and/or NEW Registered C	0.0° 11		- A	U	M
		Enter name of NEW Registered Agent and/or NEW Registered C	Jince addr	<u>'ess</u> :	OF STATE		
		John F. Flanigan, Esq., c/o Haile, Shaw & Pfaffenberger, P.A.				0 1 ش	
		NEW Registered Office Address:			. >	_	
		660 US Highway 1, Third Fl.					
		North Palm Beach , FL	33408				
th ag wa	e cha ent v as/we	imited liability company is not organized under the law, inge or changes are made, the Florida street address of twill be identical. Or, if the case of a Florida limited lial are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	the regist bility con the limit	ered office apany, it is ed liability	e and the busing s hereby confir y company or a	ess offi med th	ice of the registered at the change(s)
		At	Jerry	/ Marcop	oulos, Mana	ager	
	Signa	ture of a member or of thorized representative of a member			Printed or typed	name of	signee
pr th to no	ovisi e obl mer otifie	by accept the appointment as registered agent and agre ons of all statules relative to the proper and complete p igations of myposition as registered agent as provided ely reflect a change in the registered office address, I ha hin writing of this change.	ee to act i performa I for in Cl ereby con	n this cape nce of my c napter 605 nfirm that i	acity. I further duties, and I ar , F.S. Or, if th the limited liab	r agree m famil iis doci bility co	to comply with the liar with and accept ment is being filed ompany has been
Si	gnatu	re of Registered Agent Division of Corporations • P.O. B	ox 6327•	Tallahas	see, FL 32314	ļ	

FILING FEE: \$25.00