

LI30000 60311

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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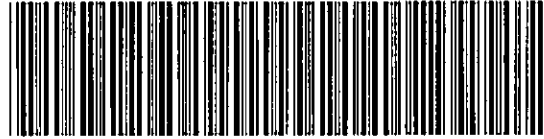
(Business Entity Name)

(Document Number)

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2020 JAN 22 AM 7:33
SECRETARY OF STATE
TALLAHASSEE, FL

O SIMMONS

FEB 18 2020

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. Name of the limited liability company: 998 SW 144 Court RD LLC

2 (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
1100 S.E. 5TH CT
Suite 87
Pompano Beach, Florida - 33060

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
Same

3. Date of filing/registration in Florida
4/24/2013

4. Document number
L13000060311

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
David Simon
17131 NE 11TH CT Miami, FL 3316
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

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(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
David Schroeder
dschro154@gmail.com

NEW Registered Office Address:
1100 S.E. 5TH CT
Suite 87

Pompano Beach, FL 33060

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

David Schroeder
Printed or typed name of signer

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 605, 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