## 11300065498

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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(Business Entity Name)
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T. LEMIEUX

## **COVER LETTER**

Division of Corporations
SUBJECT: METRO ACE, 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:
Matthew Kelly
Name of Person
Hughes Development Group, LLC
Firm/Company
303 Fellowship Rd., Suite 202
Address
Mount Laurel, NJ 08054
City/State and Zip Code
Nvanistendal@metrocommercial.com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Matthew Kelly <u>at (856)</u> 802-1654
Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: MAILING ADDRESS:
Registration Section Registration Section
Division of Corporations Clifton Building Division of Corporations P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32314
Tallahassee, Florida 32301
Enclosed is a check for the following amount:

□ \$55 Filing Fee & Certified Copy

17 \$25 Piling Free

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

Pursuant to the provisions of sections 605.0114, 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.

	<del></del>		
2. (a) Principal office address of limited liability compa	nv: 1235 Gordon River Trail		<del>-</del>
(Note: MUST BE STREET ADDRESS)	Naples, FL 34105	-	- ECC
	Attention; D. Hughes	****	:: <u>[]</u>
		72	4 (1)
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1235 Gordon River Trail		47 24
	Naples, FL 34105	2	727
	Attention: D. Hughes		ීග්ට්
		3	.**T[
05/03/2013	L13000065498	=	
3. Date of filing/registration in Florida	4. Document number	L+1	44
5. (a) Registered Agent and Registered Office shown o	n the records of the Florida De	pt. of State	<b>2</b> :
Registered Agent:	NRAI SERVICES, INC.		
Registered Office Address:	1200 SOUTH PINE ISLAND ROAD		
	PLANTATION, FL 33324		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u> <u>NEW</u> Registered Agent:	EW Registered Office addre	<u>ss</u> :	
<b></b> & &			
······································	1235 Gordon River Trail		
NEW Registered Office Address:	1235 Gordon River Trail Naples, FL 34105		
······································		,FL	

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 statules 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