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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: BOCA FL4, LLC Name of Lin	mited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Off	fice Change and fee(s) are submitted for filing.
Please return all correspondence concerning th	nis matter to the following:
ADAM SMALL Name of Person	
BOCA FL4, LLC	
Firm/Company	
2500 N. MILITARY TRAIL S	STE 220
Address	। जिल्ला
BOCA RATON, FL 3343	1
City/State and Zip Code	<u> </u>
asmall@barnescpas.com	١
E-mail address: (to be used for future annual report not	ification)
For further information concerning this matter	; please call:
ADAM SMALL	at (954) 465-6593
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following	; amount:
S25 Filing Fee	C \$55 Filing Fee & Certified Conv

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.

46	<i></i> ,	or bom, in the state of 1 tortale.					
l.	Nar	ne of the limited liability company: BOCA FL4, LLC					
2.	(a)	Principal office address of limited liability company (<i>Note: MUST BE STREET ADDRESS</i>)	2500 N. MILITARY TRAIL SUITE 220 BOCA RATON, FL 33431				
	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	2500 N. MILITARY TRAIL SUITE 220 BOCA RATON, FL 33431				
07	/11/13		L13000098481				
3.	Dat	e of filing/registration in Florida	4. Document number				
5.	(a)	Registered Agent and Registered Office shown on t	he records of the Florida D	ept-of	State:		
		Registered Agent:	CORPORATION SERVICE COMPANY		置	• ; •	
		Registered Office Address:	1201 HAYES STREET	ا الله الله الله الله الله الله الله ال	26		
			TALLAHASSEE, FL 32301				
	(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	V Registered Office addr	ess:	12: 51		
		NEW Registered Agent:	ADAM SMALL				
		NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2500 N. MILITARY TRAIL SUITE 220				
		INUST BE FLORIDA STREET ADDRESS	BOCA RATON	,FI	, 33431		
Ç0	nfirr	imited liability company is not organized under the laned that after the change or changes are made, the Fle business office of the registered agent will be identity company, it is hereby confirmed that the change(s) imbers of the limited liability company or as otherwise rating agreement of the limited liability company.	orida street address of the i	register orida li	ed offic		

Signature of a member or authorized representative of a member

ADAM SMALL

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