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DEC 3 1 2013 **T. HAMPTON**

COVER:LETTER

TO: Registration Section

Division of Corporations

BOCA FL6, 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:

ADAM SMALL

Name of Person

BOCA FL6, LLC

2500 N. MILITARY TRAIL STE 220

Address

BOCA RATON, FL 33431

City/State and Zip Code

asmall@barnescpas.com

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

For further information concerning this matter, please call:

ADAM SMALL

Name of Person

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:

■ \$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 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.

1.	Nar	me of the limited liability company: BOCAFLB, LLC				
	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	*	••		
2.			BOCA RATON, FL 33431			
		(Note: MOST BE STREET ADDRESS)				
	(b)	Mailing address of limited liability company:	2500 N. MILITARY TRAIL SUITE 220			
	(0)	(Note: MAY BE POST OFFICE BOX)	BOCA RATON, FL 33431			
08/21/13			L13000118006			
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 De	pt. of St	ate:	
		Registered Agent:	CORPORATION SERVICE COMPANY	7.55	3	•
		Pagistared Office Address:	1201 HAYES STREET		닦	\neg
		Registered Office Address:	TALLAHASSEE, FL 32301		?	
					<u> </u>	
				음~<	_	П
	(b) Enter name of NEW Registered Agent and/or NEW Registered Office address					
	` ′			므로	PH 12:	
		NEW Registered Agent:	ADAM SMALL	<u> 건설</u> 면뻐	-	
		NEW Registered Office Address:	2500 N. MILITARY TRAIL SUITE 220	<i>></i>		
		(MUST BE FLORIDA STREET ADDRESS)				
			BOCA RATON	,FL_33	3431	
an lia th th	nfiri d the ibilit e me e ope	limited liability company is not organized under the lemed that after the change or changes are made, the Flee business office of the registered agent will be identify company, it is hereby confirmed that the change(s) embers of the limited liability company or as otherwise erating agreement of the limited liability company.	orida street address of the re cal. Or, in the case of a Flo was/were authorized by an	egistered rida limi affirmati	l offic ited ive vo	ote of
Sig	natur	e of a member or authorized representative of a member				
	AM SI		_			
		or typed name of signee				
I co ar Ci ac	here mpl id I d hapt idres	by accept the appointment as registered agent and a y with the provisions of all statules relative to the pro am familiar with and accept the obligations of my po. er 608, F.S. Or, if this document is being filed to me ss, I hereby confirm that the limited liability company	gree to act in this capacity. per and complete performa sition as registered agent as rely reflect a change in the r has been notified in writing	I furthen nce of m provide registere g of this	r agre iy dut id for id offi chan	e to ies, in ce ge.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent