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COVER LETTER

TO: Registration Section **Division of Corporations** BOCA FL7, 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 FL7, LLC Firm/Company 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: **MAILING ADDRESS:** Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 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: BOCA FL7, LLC				
2.	(a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	2500 N. MILITARY TRAIL SUITE 220 BOCA RATON, FL 33431			
	(b)	Mailing address of limited liability company:	2500 N. MILITARY TRAIL SUITE 220			
	` '	(Note: MAY BE POST OFFICE BOX)	BOCA RATON, FL 33431			
08/	21/13		· L13000118020			
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 S	State:	
		Registered Agent:	CORPORATION SERVICE COMPANY		<u> </u>	
		Registered Office Address:	1201 HAYES STREET TALLAHASSEE, FL 32301	SECH!	013 PE	-11
				25		
	(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	V Registered Office addre	essi =	3 PH	
		NEW Registered Agent:	ADAM SMALL	등	<u>125</u>	_
		NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2500 N. MILITARY TRAIL SUITE 220	57	£	
		1.20.22.20.22.20.22.7.22.7.22.22.7	BOCA RATON	,FL	33431	
co an lia	nfiri d the bilit e me	imited liability company is not organized under the land that after the change or changes are made, the Flebusiness office of the registered agent will be identify company, it is hereby confirmed that the change(s) mbers of the limited liability company or as otherwise erating agreement of the limited liability company.	orida street address of the r cal. Or, in the case of a Flo was/were authorized by an	registere orida lir ı affirma	ed office mited ative vo	ote of
Sig	natur	e of a member or authorized representative of a member	-			
	AM SA	MALL or typed name of signee	_			
I co an Cl aa	here mply d I d lapte lares	by accept the appointment as registered agent and as with the provisions of all statules relative to the proum familiar with and accept the obligations of my poser 608, F.S. Or, if this document is being filed to ments, I hereby confirm that the limited liability company	gree to act in this capacity. Sper and complete performe Sition as registered agent a rely reflect a change in the has been notified in writin	I furth ance of is provid register ig of thi	er agre nıy dut led for red offi s chän	ee to tes, in ice ge.

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

Signature of Registered Agent