L13000 131519

(Req	uestor's Name)			
(Address)				
(Address)				
(City	/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



900325074459

02/22/19--01007--007 *#25.00

FALLAHASSEELFLORID

2019 FEB 22



COVER LETTER

TO:

INHS18 (2/14)

TO:	Registration Section Division of Corporations				٠	
SUBJI	LEGACY SHOPPES, LLC				\$ () () () () () () () () () (
3000		Name of Limited Liability Company				
Dear S	ir or Madam:				1885 1885 1885	
					761 Cm	
The en	closed Registered Agent/Registered Offi	ce Change	and fe	e(s) are submitted for filing.		
Please	return all correspondence concerning thi	s matter to	the fol	llowing:	· · · · · · · · · · · · · · · · · · ·	
MAR	TIN P. HEISE					
	Name of Person			-		
LEGA	ACY SHOPPES, LLC					
	Firm/Company			-		
3700	AIRPORT ROAD, SUITE 302					
	Address			•		
ВОС	A RATON, FL 33431					
	City/State and Zip Code			•		
mph@	ocityconstruction.com					
E	-mail address: (to be used for future ann	ual report i	notifica	ition)		
For fur	ther information concerning this matter,	please call	l:			
MAR ²	TIN P. HEISE	561		997.0086		
	Name of Person		-	Area Code & Daytime Telepho	ne Number	
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		Regis Divis P.O. I	LING ADDRESS: stration Section ion of Corporations Box 6327 hassee, Florida 32314		
	Enclosed is a check for the following	amount:				
	S25 Filing Fee		S 55	Filing Fee & Certified Copy		

**. STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOI LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability compan submits the following statement in order to change its registered office or registered agent, or both, in the State controlled.

rioria		IODDEC I	1.0		
1. Na	ame of the limited liability company: LEGACY Sh		LC		
2. (a)	3700 AIRPORT ROAD	(b) <u>3</u>	(b) 3700 AIRPORT ROAD		
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	SUITE 302	S	UITE 302		
	BOCA RATON, FL 33431	B	OCA RATON, FL 33431		
	SEPTEMBER 17, 2013	L1	3000131519		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	BCRA, LLC				
J. (4)	Registered Agent and Registered Office shown on the records of LYNN FINANCIAL CENTER	of the Florida Dej	pt. of State:		
	Registered Office Address (MUST BE FLORIDA STREET				
	1905 NW CORPORATE BLVD, SUITE 31	2019 (
	BOCA RATON , F	L_334312	FEB 22		
(b)	MARTIN P. HEISE	اند؛ «لا ~س ديا			
•	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ed Office addres	<u>s:</u>		
	3700 AIRPORT ROAD		mr v		
	NEW Registered Office Address:				
	SUITE 302				
	BOCA RATON , F	_L 33431			
the offer agont was we the arr	imited liability company is not organized under the lange or changes are made, the Florida street address or ill be identical. Or, in the case of a Florida limited by a firmative vote of the members of the organization or the operating agreement of the vaccept the appointment as registered agent and agents of all statutes relative to the proper and completing of all statutes relative to the proper and completing of my position as registered agent as provided by reflect a change in the registered office address, if a lit writing of this change.	of the registered liability composition of the limited liability of the liabilit	ed office and the business office of the registere cany, it is hereby confirmed that the change(s) if liability company or as otherwise provided in ility company. IN P. HEISE Printed or typed name of signee		

nature of Registered Agent