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To:

Division of Corporations

Email Address:

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

## LLC REGISTERED AGENT CHANGE SP JH APARTMENTS LLC

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TO:

Registration Section

## **COVER LETTER**

Division of Corporations								
SUBJECT: SP JH APARTMEN								
Name of Limited Liability Company								
Dear Sir or Madam:								
The enclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.							
Please return all correspondence concerning this ma	atter to the following:							
Mary Castillo								
Name of Person								
Registered Agent Solutions, Inc.								
Firm/Company								
5301 Southwest Pkwy, Suite 400								
Address								
Austin, Texas 78735								
City/State and Zip Code								
E-mail address: (to be used for future annual r	eport notification)							
For further information concerning this matter, plea	se call:							
Mary Castillo	705-7274							
Name of Person	Area Code & Daytime Telephone Number							
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314							
Tallahassee, Florida 32301	nt							
Enclosed is a check for the following amo								
□ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy							
INHS18 (2/14)								

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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. N	ame of the limited liability company: SF	JH APAI	RTM	ENTS	LLC			
2. (a)	C/O STANDARD COMPAN	NIES	(b)	C/O 5	STANDAF	RD COM	1PA	NIES
` ,	Principal office address of limited liability (Note: MUST BE STREET ADDRE		(-)		Mailing address of	flimited liabili	ty comp	nany;
	31899 DEL OBISPO SUIT	<del></del> .		31800	( <u>Noie: MAY B.</u> DEL OBI		_	<u>-</u>
	SAN JUAN CAPISTRANO, (	JA 926/5		SAN J	UAN CAPIS	TRANO,	CA	92675
	01/29/2014		Į	_1400	0016185			
3.	Date of filing/registration in Flor	rida	4.		Document nur	nber	•	<del></del> ,
5. (a)	REGISTERED AGENTS S	SOLUTIO	NS,	INC.				
(-,	Registered Agent and Registered Office shown on		Florida I	Dept. of Sta	te:			
	155 OFFICE PLAZA DRIV	/E			_			
	Registered Office Address (MUST BE FLORIS  SUITE A	<u>DA STREET ADI</u>	<u>DRESS)</u>					
	TALLAHASSEE	EI 3	2301		<del>-</del>			
(b)	Registered Agent Solution	s, Inc.	_		<b></b>		2023 JUL 1	7:
	Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Off	fice addi	<u>127</u> :				طري موري
	2894 Remington Green Ln.					ယ	ROY ROY	
	NEW Registered Office Address:		-		-	田い	PM 2:	C.
	Ste. A				_	要当	: 25	
	Tallahassee	, FL3:	2308		_	•	•	
the cha agent v was/we	imited liability company is not organized usinge or changes are made, the Florida stree will be identical. Or, in the case of a Floridate authorized by an affirmative vote of the cles of organization or the operating agree	et address of the da limited liabil e members of th	e regist lity con he limit	ered offic ipany, it i ed liabili	e and the busing is hereby confir ty company or a	ess office of med that the	f the re chang	gistered ge(s)
/s/	Jaclyn Wright		Jacly	n Wrigh	nt	Assistant Secretar	y, Registeri	ed Agent Solutions, In
Signa	ture of a member or authorized representative of a m	nember	<u>-</u>		Printed or typed	name of signe	2	
provisi	by accept the appointment as registered ag ons of all statutes relative to the proper an igations of my position as registered agent ely reflect a change in the registered office	nd complete per	rtormai	ice of my	duties, and I ar	n familiar w	uth an	d accept

Agent

Mackenzie Hibler, Assistant Secretary

notified in writing of this change.