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SECRETARY OF STATE
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LCC RO Charge

JUL 03 2014 T. CARTER

COVER LETTER

TO:

INHS18 (2/14)

Registration Section

Divisi	on of Corporations					
SUBJECT:	3RD AVENUE PARK, LLC					
•	Name of Limited Liability Company					
Dear Sir or M	adam:					
The enclosed	Registered Agent/Registered Office	e Change and	fee(s) are submitted for filing.			
Please return a	all correspondence concerning this	matter to the	following:			
Brandon D.	Beardsley					
	Name of Person		_			
Mowrey, Sh	noemaker & Beardsley, P.L.					
	Firm/Company		_			
2801 N. Th	ird Street					
	Address					
St. Augustin	ne, FL 32084	•	·			
	City/State and Zip Code					
bbeardsley	@ancientcitylaw.com					
E-mail a	ddress: (to be used for future annua	ıl report notifi	cation)			
For further inf	formation concerning this matter, p	lease call:				
Brandon D.	Beardsley	904 at (824-5711			
	Name of Person		Area Code & Daytime Telephone Number			
Regisi Divisi Clifto 2661	tration Section from of Corporations n Building Executive Center Circle nassee, Florida 32301	Reg Div P.C	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 lahassee, Florida 32314			
Enclo	sed is a check for the following a	mount:				
2 \$25	5 Filing Fee	□ \$5	5 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 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.	Na	me of the limited liability company: 3RD AVENUE	PAR	K, LLC					
2.	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 5940 US 1 N	(1	(b)					
		St. Augustine, FL 32084		St. A	ugustine	e, FL 3208	4		
		Tebruary 20th 2014 Date of filing/registration in Florida		L1400	003009				
3.		Date of filing/registration in Florida	4.		Docı	ıment numbe	er		
5.	(a)	Brandon D. Beardsley							
	,	Registered Agent and Registered Office shown on the records of the			State:				
		Registered Office Address (MUST BE FLORIDA STREET A	<u>DDRES</u>	<u>S)</u>					
		2825 Lewis Speedway, Suite 107		<u> </u>					
		St. Augustine , FL	32084	ļ					₹
	(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u>	Office a	ddress:				4 JUN 18 PN	CME WAS DESCRIBED.
		NEW Registered Office Address:						3: 07	- RZ
		2801 N. Third Street							DA TOA
		St. Augustine, FL_	32084	1	_				
th ag with	e cha gent vas/was/we e art	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the lature of a member or authorized representative of a member	the reg bility of f the lin limited	istered of company mited lia liability	ffice and it is here bility con company	the business by confirme npany or as o	s office of that the otherwise me of sign	of the he chase prov	registered nge(s) rided in
pr th to no	nere ovis e ob mer otifie	by accept the appointment as registered agent and agree ions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address, I have a change in the registered office address, I have a change.	ee 10 ac perfori I for in iereby	nance of Chapter confirm i	my duties 605, F.S. hat the li	s, and I am j s. Or, if this imited liabili	amiliar docume ity comp	with a nt is beany he	nd accept eing filed is been
S	ignati	ure of Registered Agent							

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