

L14000060708

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

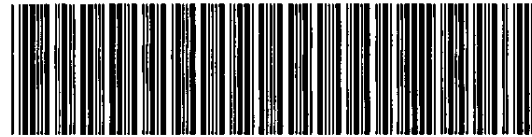
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200296256522

03/21/17--01016--027 \*\*200.00

MAR 22 2017  
S. YOUNG

FILED  
STATE  
SECRETARY OF  
TALLAHASSEE, FLORIDA  
17 MAR 21 PM 1:58

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** NORTHWOOD HOLDINGS 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:

WILLIAM HSU WU

Name of Person

NORTHWOOD HOLDINGS LLC

Firm/Company

9482 MADEWOOD CT

Address

ROYAL PALM BEACH, FL 33411

City/State and Zip Code

www0430@gmail.com

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

For further information concerning this matter, please call:

WILLIAM HSU WU 305 6065855  
Name of Person at ( ) Area Code & Daytime Telephone Number

**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

FILED  
SECRETARY OF FLORIDA  
TALLAHASSEE, FLORIDA  
17 MAR 21 PM 1:58

**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.*

**NORTHWOOD HOLDINGS LLC**

1. Name of the limited liability company: 9482 MADEWOOD CT 9482 MADEWOOD CT
2. (a) Principal office address of limited liability company: (b) Mailing address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)  
ROYAL PALM BEACH ROYAL PALM BEACH  
FL 33411 FL 33411  
4/14/2014 L14000060708

3. Date of filing/registration in Florida 4. Document number  
STANFORD PROPERTY MANAGEMENT LLC

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
9482 MADEWOOD CT

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

ROYAL PALM BEACH 33411  
, FL

**REGISTERED AGENTS INC**

- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

3030 N. ROCKY POINT DR., STE 150A

NEW Registered Office Address:

TAMPA 33607  
, FL

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]  
Signature of a member or authorized representative of a member

William Hsu Wu  
Printed or typed name of signee

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

[Signature]  
Signature of Registered Agent

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

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
47 MAR 21 PM 1:58