14000112505

(Requestor's Name)						
(Address)						
(Address)						
(Cid	ty/State/Zip/Phone	e #)				
PICK-UP	☐ WAIT	MAIL				
. (Bu	isiness Entity Nar	ne)				
(Document Number)						
Certified Copies	_ Certificates	s of Status				
Special Instructions to	Filing Officer:					
LIVE I AM 9: L						
MY - I HASSEE						
2017.						

Office Use Only



300298219203

05/02/17--01021--008 ****4771**.00

SECRETARY OF STATE

D. BRUCE MAY 08 2017

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Winds Nam	av For	151 Aputnents Liability Company	ue
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Offi	ice Change ar	nd fee(s) are submitted for filing.	
Please return all correspondence concerning the			
Charlotte Tilley			
Name of Person			
Law Office of Michael Tilley			÷
Firm/Company			AS 2
128 Wilderness Cay			LAH!
Address			-1 ASSE
Naples FL 34114			E PS
City/State and Zip Code			ORIGINAL TO
Mike@MRTilley.com			5
E-mail address: (to be used for future ann	nual report no	tification)	
For further information concerning this matter,	, please call:		
Charlotte	561	392-5707	
Name of Person		Area Code & Daytime Telep	hone 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	g amount:		
■ \$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.

Principal office address of limited liability company: (Note: MAT BE STREET ADDRESS) 6400 N Andrews Ave Ste 490 Ft Lauderdale, FL 33309 07/16/2014 3. Date of filing/registration in Florida 4. Document number 5. (a) INCORP SERVICES LLC Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 17888 67Th Court North Registered Office Address Loxahatchee FL 33470 Incorp Services, Inc.	1. Na	me of the limited liability company: Windsor Fo	orest Ap	artments LLC	<u> </u>
Principal office address of limited liability company: (Note: MAY RE POST OFFICE BOX) 6400 N Andrews Ave Ste 490 Ft Lauderdale, FL 33309 07/16/2014 L14000112505 3. Date of filing/registration in Florida 4. Document number 5. (a) INCORP SERVICES LLC Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 17888 67Th Court North Registered Office Address (MUST BE FLORIDA STREET ADDRESS) Loxahatchee FL 33470 Loxahatchee FL 33470 Loxahatchee, FL 33470 Loxahatchee, FL 33470 Loxahatchee FL 33470 Loxahatc					
O7/16/2014 Date of filing/registration in Florida INCORP SERVICES LLC Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 17888 67Th Court North Registered Office Address Loxahatchee FL 33470 InCorp Services, Inc. Enter name of NEW Registered Agent and/or NEW Registered Office address: Loxahatchee, FL 33470 Loxahatchee, FL 33470 Loxahatchee, FL 33470 If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that at the change or changes are made, the Florida street address of the registered office and the business office of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that at the change or changes are made, the Florida street address of the registered office and the business office of the registered office of the registered office and the business office of the registered of the limited liability company or as otherwise provide the articles of organization oythe operating agreement of the limited liability company. Signature of a member of authorized representative of the members of the limited liability company or as otherwise provides of all statutes relative to the proper and complete performance of my duties, and I am Jamiliar with and the efficiency of the scharge. In this document is being the registered office address. I hereby confirm that the limited liability company has be not the proper and complete performance of my duties. In this document is being the registered office address. I hereby confi	2 . (u)		:	(5)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
3. Date of filing/registration in Florida 4. Document number 5. (a) INCORP SERVICES LLC Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 17888 67Th Court North Registered Office Address (MUST BE FLORIDA STREET ADDRESS) Loxahatchee , FL 33470 InCorp Services, Inc.		6400 N Andrews Ave Ste 490			
3. Date of filing/registration in Florida 4. Document number 5. (a) INCORP SERVICES LLC Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 17888 67Th Court North Registered Office Address (MUST BE FLORIDA STREET ADDRESS) Loxahatchee , FL 33470 (b) InCorp Services, Inc. Enter name of NEW Registered Agent and/or NEW Registered Office address: 17888 67th Court North NEW Registered Office Address: Loxahatchee, FL 33470 Loxahatchee, FL 33470 Loxahatchee , FL		Ft Lauderdale, FL 33309			
Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 17888 67Th Court North Registered Office Address		07/16/2014		L140001	12505
Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 17888 67Th Court North Registered Office Address (MUST BE FLORIDA STREET ADDRESS) Loxahatchee , FL 33470 InCorp Services, Inc.	3.	Date of filing/registration in Florida	4		Document number
Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 17888 67Th Court North Registered Office Address (MUST BE FLORIDA STREET ADDRESS) Loxahatchee , FL 33470 (b) InCorp Services, Inc. Enter name of NEW Registered Agent and/or NEW Registered Office address: 17888 67th Court North NEW Registered Office Address: Loxahatchee, FL 33470 Loxahatchee, FL 33470 Loxahatchee , FL 33470 In the change or changes are made, the Florida street address of the registered office and the business office of the register will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that at the change was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provide the articles of organization or the operating agreement of the limited liability company. Signature of a member of authorized representative of a member of the proper and complete performance of my duties, and I am familiar with and the politication may find by this change. Signature of a member of authorized representative to the proper and complete performance of my duties, and I am familiar with and the politication may find the change in the registered agent as provided for in Chapter 605, F.S. Or, if this document is being to my thing of this change. Josie A Sorensen on behalf of Incorp Services, Inc.	5 (a)	INCORP SERVICES LLC			
Loxahatchee ,FL 33470 InCorp Services, Inc. Enter name of NEW Registered Agent and/or NEW Registered Office address: Corp.	J. (a)	Registered Agent and Registered Office shown on the record	s of the F	orida Dept. of Sta	te:
Loxahatchee ,FL 33470 InCorp Services, Inc. Enter name of NEW Registered Agent and/or NEW Registered Office address: IT888 67th Court North NEW Registered Office Address: Loxahatchee, FL 33470		17888 67Th Court North			
Enter name of NEW Registered Agent and/or NEW Registered Office address: 17888 67th Court North NEW Registered Office Address: Loxahatchee, FL 33470 Loxahatchee Loxahatch		Registered Office Address (MUST BE FLORIDA STRE	ET ADDI	RESS)	-
Enter name of NEW Registered Agent and/or NEW Registered Office address: 17888 67th Court North NEW Registered Office Address: Loxahatchee, FL 33470 Loxahatchee Loxahatch		Loxahatchee	. FL	33470	7AL SE 201
Enter name of NEW Registered Agent and/or NEW Registered Office address: 17888 67th Court North NEW Registered Office Address: Loxahatchee, FL 33470 Loxahatchee Loxahatch			·/ — 		
17888 67th Court North NEW Registered Office Address: Loxahatchee, FL 33470 Loxahatchee, FL 33470 Loxahatchee , FL 33470 If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that at the change or changes are made, the Florida street address of the registered office and the business office of the register will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provide the articles of organization or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Printed or typed name of signesful. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and the diligation of my position as registered agent as provided for in Chapter 605, F.S. Or. if this document is being to differ the proper of the proper of the proper of the proper of the limited liability company has being the provided of this change. Josie A Sorensen on behalf of Incorp Services, Inc.	(b)				- ASA
17888 67th Court North NEW Registered Office Address: Loxahatchee, FL 33470 Loxahatchee, FL 33470 Loxahatchee , FL 33470 If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that at the change or changes are made, the Florida street address of the registered office and the business office of the register will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provide the articles of organization or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Printed or typed name of signesful. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and the diligation of my position as registered agent as provided for in Chapter 605, F.S. Or. if this document is being to organize the registered office address, I hereby confirm that the limited liability company has being the registered office address, I hereby confirm that the limited liability company has being the second of this change. Josie A Sorensen on behalf of Incorp Services, Inc.		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regist</u>	ered Offic	e address:	m = m
Loxahatchee, FL 33470 Loxahatchee , FL 33470 Loxahatchee , FL 33470 If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that at the change or changes are made, the Florida street address of the registered office and the business office of the register will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provide the articles of organization or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member		17888 67th Court North			
Loxahatchee, FL 33470 Loxahatchee , FL 33470 If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that at the change or changes are made, the Florida street address of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provide the articles of organization or the operating agreement of the limited liability company. Signature of a member of authorized representative of a member of the limited liability company. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with provisions of all statutes relative to the proper and complete performance of my duties, and I am jamiliar with and the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being to married a change in the registered office address, I hereby confirm that the limited liability company has being the proper of this change. Josie A Sorensen on behalf of Incorp Services, Inc.					- <u>SA</u>
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that at the change or changes are made, the Florida street address of the registered office and the business office of the register will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provide the articles of organization or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Printed or typed name of signe-flits I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with providions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being to marely reflect a change in the registered office address, I hereby confirm that the limited liability company has being the first of this change. Josie A Sorensen on behalf of Incorp Services, Inc.					- ************************************
the change or changes are made, the Florida street address of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provide the articles of organization or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Printed or typed name of signe-flip I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being to merely reflect of change in the registered office address, I hereby confirm that the limited liability company has being find in writing of this change. Josie A Sorensen on behalf of Incorp Services, Inc.		Loxahatchee	, FL	33470	_
	signat I herefore the original in the control in th	nge or changes are made, the Florida street addres vill be identical. Or, in the case of a Florida limite authorized by an affirmative vote of the member cles of organization or the operating agreement of the ure of a member of authorized representative of a member of a member of authorized representative of a member of a memb	s of the sed liabilities of the limit dayree to lefe perfected for s, I herel	registered office ty company, it is limited liability control of the liability control of the liability control of the liability cap act in this cap or mance of my in Chapter 60 by confirm that	the and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany. Printed or typed name of signostia or typed name or typ
Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00		Division of Corporations • P.			ssee, FL 32314