

L14000125883

(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



300263702443

09/02/14--01006--014 \*\*25.00

RECEIVED  
2014 SEP -2 PM 11:30  
SUFFICIENT FILING

FILED  
14 SEP -2 PM 12:08  
TALLAHASSEE



September 2, 2014

Department of State, Florida  
Clifton Building  
2611 Executive Center Circle  
Tallahassee FL 32301

Re: Order #: 9261524 SO  
Customer Reference 1: None Given  
Customer Reference 2: None Given

Dear Department of State, Florida :

Please obtain the following:

North Federal Plaza, LLC (FL)  
Misc - Domestic LLC Filing - Filing change of agent form to  
change a registered agents address.  
Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092 .

Thank you very much for your help.

Sincerely,

Connie R Bryan  
Senior Fulfillment Specialist  
Connie.Bryan@wolterskluwer.com

FILED  
14 SEP -2 PM 12:08  
TALLAHASSEE  
SECRETARY OF STATE

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** NORTH FEDERAL PLAZA, 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:

ALAN M. GRUNSPAN

Name of Person

Firm/Company

120 NIGHTHAWK AVENUE

Address

PLANTATION, FLORIDA 33324

City/State and Zip Code

AGRUNSPAN@CFJBLAW.COM

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

For further information concerning this matter, please call:

ALAN GRUNSPAN

305

530-0050

at ( )

Name of Person

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

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. Name of the limited liability company: NORTH FEDERAL PLAZA, LLC
2. (a) 120 NIGHTHAWK AVENUE  
Principal office address of limited liability company:  
*(Note: MUST BE STREET ADDRESS)*  
PLANTATION, FL 33324
- (b) 120 NIGHTHAWK AVENUE  
Mailing address of limited liability company:  
*(Note: MAY BE POST OFFICE BOX)*  
PLANTATION, FL 33324
3. AUGUST 11, 2014  
Date of filing/registration in Florida
4. L14000125883  
Document number

5. (a) ALAN M. GRUNSPAN  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*  
100 S.E. SECOND STREET  
MIAMI, FL 33131

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

ALAN M. GRUNSPAN  
NEW Registered Office Address:  
120 NIGHTHAWK AVENUE

Plantation, FL 33324

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 of a member or authorized representative of a member

ALAN M. GRUNSPAN

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.*

By: Signature of Registered Agent

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

FILED  
14 SEP - 2 PM 12:08  
TALLAHASSEE  
SECRETARY OF STATE