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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER -

TO:	Registration Section Division of Corporations				
SUBJI	WALTHOUR'S PROPERTIE	ES L.L.C.			
3000	Name of Limited Liability Company				
Dear S	Sir or Madam:				
The en	aclosed Registered Agent/Registered Off	ice Change and fec(s) are submitted for filing.			
Please	return all correspondence concerning th	is matter to the following:			
Bertra	an Walthour				
	Name of Person				
Walth	nour's Properties L.L.C.				
	Firm/Company				
1781	NW 154 St.				
	Address				
Miam	ni Gardens, Florida 33054				
	City/State and Zip Code				
b.wal	thour35@gmail.com				
1	E-mail address: (to be used for future and	nual report notification)			
For fu	rther information concerning this matter.	please call:			
Berta	n Walthour	305 490-7033			
	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

Name of the limited liability comp	oany: WALTHOUF	R'S PROPE	ERTIES L.L.C.			
Walthour's Properties L.L.	Valthour's Properties L.L.C. (b) Walthour's Pro					
Principal office address of lim (Note: MUST BE STR			-	Idress of limited liability company MAY BE POST OFFICE BOX)		
1781 NW 154 St	, , , , , , , , , , , , , , , , , , ,	1	781 NW 154			
Miami Gardens. FL. 3305	54	<u> </u>	Miami Gardens	s, FL. 33054		
November 7, 2014			14000174045			
Date of filing/registrat	ion in Florida	4.	Docum	ent number		
a) Ida Bell						
Registered Agent and Registered Offi	ce shown on the records c	f the Florida D	ept. of State:			
lda Bell				17 SE(
Registered Office Address (MUST	T BE <u>FLORIDA STREE</u> T	(ADDRESS)		SEP CARAL		
8400 NW 25 Ave						
Miami	, F	33147		I PO AND SEED FOR		
Bertran Walthour				19 AN 7: 2		
Enter name of NEW Registered Age	<u>255</u> :	- E				
Bertran Walthour						
Bertran Walthour NEW Registered Office Address:	<u> </u>		_			

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.

Ida Bell

Signature of a member or authorized representative of a member

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 of Registered Agent