14000179896

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COVER LETTER

Division of Corporations						
SUBJECT: <u>SPF 200 East Las Olas, LLC</u> Name	of Limited Liability Company					
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Offic	e Change and fee(s) are submitted for filing.					
Please return all correspondence concerning this	matter to the following:					
Kathy Moro						
Name of Person						
Frank Weinberg Black, P.L. Firm/Company						
7805 SW 6th Court						
Address Plantation, FL 33324						
City/State and Zip Code						
Lynda Watkins@Stiles.com KMoro@fwblaw.net E-mail address: (to be used for future annu-	·					
Lynda Watkins						
Name of Person	at (954) 627-9350 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					

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTHFOR 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: <u>SPF 200 East L</u>	as Olas, Ll	<u>.C</u>
2.	(a) /	ATTN: Lynda Watkins	(b)	SAME
	\ /_	Principal office address of limited liability company:	_	Mailing address of limited liability company:
		(Note: MUST BE STREET ADDRESS)		(<u>Noie: MAY BE POST OFFICE BOX</u>)
		301 E LAS OLAS BLVD		
		FT. LAUDERDALE. FL 33301		
		11/20/2014		L14000179896
3.		Date of filing/registration in Florida	4.	Document number
5.	(a)	CORPORATION SERVICE COMPANY		
	` '	Registered Agent and Registered Office shown on the records of	the Florida I	Dept, of State:
		1201 HAYS STREET		SECHE TALL
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				AC 8
		TALLAHASSEE , FL	. <u>32301</u>	
	(b)	FRANK WEINBERG & BLACK P.L.		
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office addr	ess:
		7805 SW 6th Court		SSEE, FI
		NEW Registered Office Address:		FLE 21
		C/O DAVID BLACK, ESQ.		
		PLANTATION , FL	. <u>33324</u>	
the ag	e cha ent v as/we	imited liability company is not organized under the layinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liabre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the registe bility com of the limit	ered office and the business office of the registered pany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in
	_	ure of a member or authorized representative of a member		Printed or typed name of signee
_		by accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I have	ee to act it performan d for in Ch hereby con	n this capacity. I further agree to comply with the use of my duties, and I am familiar with and accept apter 605, F.S. Or, if this document is being filed firm that the limited liability company has been
Si	ignatu	re of Registered Agent		

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