## L15000069811

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## **COVER LETTER**

TO: Registration Section Division of Corporations	•	
SUBJECT: Miami Shores Apartments LI	LC	
	e of Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	ce Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
William Hirshberg		
Name of Person		
Firm/Company		
POB 402642		
Address		
Miami Beach Fl 33140		
City/State and Zip Code		
whny58@gmail.com		
E-mail address: (to be used for future annu	ual report notification)	
For further information concerning this matter,	please call:	
William Hirshberg	786 570 1813	
Name of Person	Area Code & Daytime Telephone Nur	
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:	
<b>☑</b> \$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.

(a)	Principal office address of limited liability company:	(b) _	
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	9005 NE 8th Ave	i	POB 416540
	Miami Fl 33138		Miami Beach Fl 33141
	April 21, 2015	L	15000069811
	Date of filing/registration in Florida	4.	Document number
(a)	Urban Resource Inc.		
( )	Registered Agent and Registered Office shown on the records of Attn Daniel Veitia	of the Florida D	ept. of State:
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	170
	1193 71st st		
	Miami Beach , F	33141	
	William Hirshberg	<u>.</u>	
(b)	Enter name of NEW Registered Agent and/or NEW Register	ed Office øddra	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
			<u></u>
	NEW Registered Office Address:		<del></del>
	6799 Collins Ave Apt 806		
	Miami Beach , F	33141	
		<del>-</del>	tate of Florida, it is beauty confirmed that after
e cha gent v as/w	imited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members icles of organization of the operating agreement of the	of the registe liability com s of the limite	ered office and the business office of the registered apany, it is hereby confirmed that the change(s) and liability company or as otherwise provided in
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**FILING FEE: \$25.00** 

INHS18 (2/14)