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DIVISION OF CORPORATIONS
18 MAR -7 AM 9:44

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CENTRAL PROJECT, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JARVIS CHARLES LANDRY
Name of Person

CENTRAL PROJECT, LLC
Firm/Company

2925 NW 126TH AVE # 1218
Address

SUNRISE, FLORIDA 33323
City/State and Zip Code

DRAADVISORS@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SONIA AMIN at (980) 218-9763
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input checked="" type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|---|---|

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**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: CENTRAL PROJECT LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

900 SE 2ND ST. #501

FORT LAUDERDALE, FL 33301

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

5605 77 CENTER DR. SUITE 101

CHARLOTTE, NC 28217

JUNE 1, 2015

200273482652

3. Date of filing/registration in Florida

4. Document number

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

JARVIS CHARLES LANDRY

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

2925 NW 126TH AVE #1218

SUNRISE, FL 33323

(b) _____
Enter name of NEW Registered Agent and/or NEW Registered Office address:

JARVIS CHARLES LANDRY

NEW Registered Office Address:

900 SE 2ND ST. #501

FORT LAUDERDALE, FL 33301

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DIVISION OF CORPORATIONS
10 MAR - 7 AM 9:40

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

JARVIS CHARLES LANDRY

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