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COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJI	Vintage Property Management Services LLC						
		e of Limited	Liability Company				
Dear S	ir or Madam:						
The en	closed Registered Agent/Registered Offi	ce Change a	nd fee(s) are submitted for filing.				
Please	return all correspondence concerning thi	s matter to t	he following:				
Anne	tte Andrews						
	Name of Person						
Vinta	ge Property Management Services	s LLC					
	Firm/Company						
600 1	N Thacker Avenue						
	Address		<u>-</u>				
Kissir	mmee. Florida 34741		•				
	City/State and Zip Code						
Anne	ttea@hotmail.com						
E	E-mail address: (to be used for future ann	ual report no	otification)				
For fu	rther information concerning this matter,	please call:					
Anne	tte Andrews	407 at (346 1798)				
	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				
INHS1	8 (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. N	ame of the limited liability company: Vintage Prope	rty M	1an	agemer	nt Services LLC	
2. (a)	600 N Thacker Avenue, Suite A8		(b)	600 N	Thacker Avenue Suite A8	
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(0)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Kissimmee, Florida. 34741		Kissimmee, Florida. 34841			
	Masimired, Florida, 54747		•	1(19911111	1 1011da. 3-10-1	
	. 06/01/2015		L	150000	98315	
3.	Date of filing/registration in Florida	4.			Document number	
5. (a)	Jeffrey Andrews.					
J. (a,	Registered Agent and Registered Office shown on the records of the	he Flor	ida [Dept. of Sta	te:	
	745 Hacienda Circle,				ASE 5	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			- LEGE ALS		
	Kissimmee					
		34741			SFR P I	
(b)	Steven Andrews				ASSFE, FLORIG	
(0)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			- BA		
	600 N Thacker Avenue,					
	NEW Registered Office Address:				_	
	Kissimmee				-	
		0 4 77 4				
	, FL	3474	-1		_	
the chagent was/w the art	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the law autre of a member or authorized representative of a member above accept the appointment as registered agent and agreeions of all statutes relative to the proper and complete.	the rebility f the limite	gist cor limited lia nne	ered officenpany, it ted liability contexte And	the and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in impany. Irews Printed or typed name of signee Printed or typed name of signee	
notifie	tions of all statutes relative to the proper and complete ligations of my position as registered agent as provided rely reflect a change in the registered office address, I hed in writing of this change.	l fór i ereby	n Ci , coi	haptér 60 nfirm thai	15, F.S. Or, if this document is being filed t the limited liability company has been	
Signat	urt of Registered Agent					
	Division of Company description D	63	77	. T-11.1.	Et 22214	

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