## L15000172223

(Red	questor's Name)		
(Add	dress)		
(Add	dress)		
(City	//State/Zip/Phone	#)	
PICK-UP	☐ WAIT	MAIL	
(Bus	siness Entity Nam	e)	
(Document Number)			
Certified Copies	Certificates	of Status	
Special Instructions to Filing Officer:			

Office Use Only



500291364005

10/24/16--01009--016 \*\*25.00

16 OCT 24 AH II: 57 DIVISION OF CORPORATIONS

O SIMMONS OCT 26 2016

## **COVER LETTER**

TO:	Registration Section	
	Division of Corporations	

501 Village Boulevard, LLC SUBJECT:		
	ne of Limite	d Liability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Off	fice Change	and fee(s) are submitted for filing.
Please return all correspondence concerning th	is matter to	the following:
Edward P. Kelly		
Name of Person		
Trog Hawley Capital, LLC		
Firm/Company		<u></u>
501 Village Boulevard, Suite 2		
Address		<del></del>
West Palm Beach, FL 33409		
City/State and Zip Code		
ekelly@troghawley.com		
E-mail address: (to be used for future and	nual report r	notification)
For further information concerning this matter	, please call	:
Edward Kelly	561	768-7751
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	g 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.

1.	Na	me of the limited liability company: 501 Village Bo	ouleva	rd, LLC			
2	(a)	501 Village Blvd	(t	E04 Mills	age Blvd		
۵.	(4)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ (	· ——	Mailing address of limited liability con (Note: MAY BE POST OFFICE E		
		Suite 2		Suite 2			
		West Palm Beach, FL 33409	_	West Pa	lm Beach, FL 33409		
		10/09/2015		L1500017	72223		
3.		Date of filing/registration in Florida	4.		Document number		
5.	(n)	Trog Hawley Capital, LLC					
٦.	(a)	Registered Agent and Registered Office shown on the records of th	e Florid	Dept. of State	- 3:		
		354 Toney Penna Drive			35/10	6	
Registered Office Address (MUST BE FLORIDA STRE			DDRESS	<u> </u>	SÍON		•
		Suite 1			07	2	*********
		Jupiter, FL3	33409		DIVISION OF CORE GRAFIGH	OCT 24 AH II: 57	i
						**	D
	(b)	Enter name of NEW Registered Agent and/or NEW Registered C	Miss of	duoce:	-	57	
		Enter name of NEW Registered Agent and/or NEW Registered C	mice ac	aress:	(/-		
		501 Village Blvd					
		NEW Registered Office Address:			-		
		Suite 2			-		
		West Palm Beach , FL	33409		_		
the ag with I protect the to no	e cha ent v as/wo e arti be arti e obl mero otified	imited liability company is not organized under the law inge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law in the appointment as registered agent and agreement of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I had in writing of the change.	he regional he regional he regional he regional he regional he regional he reby control he regional he regiona	stered office ompany, it is nited liability liability con AM RYAN In this cap ance of my Chapter 605 onfirm that	e and the business office of the shereby confirmed that the chay company or as otherwise propany.  I, MANAGING DIRECTOR  Printed or typed name of signee acity. I further agree to completely and I am familiar with the limited liability company has been acity.	registeringe(s) vided in ROF	the
7	પુલ્લ	Hankey Coltal UC By Apan Ryan  Hankey Coltal UC By Apan Ryan  Filing FE	0X 032	/● Talianas	ssee, FL 32314		