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(Requestor's Name) (Address) (Address)	400302147184
(City/State/Zip/Phone #)	08/10/1701011025 **25.00
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	201 AUG 10 PH 2: 42
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CSC - WILMINGTON 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

TO: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ashley Jiminez ashley.jiminez@cscglobal.com

Date: August 8, 2017

Order#: 758394/025

Re: CUSTOM PROPERTY MANAGEMENT, LLC

Enclosed please find:

XX Change of Registered Agent and Office.
XX Check in the amount of \$25.00.

Please take the following action:

XX	File in your office on a routine basis.
<u>XX</u>	Issue Proof of Filing.
<u>XX</u>	Return Regular Mail in the enclosed envelope.

Attn:Ashley Jiminez c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

## 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.

Na	me of the limited liability company: <u>CUSTOM PRO</u>	PERTYN	ANAGEM	ENT, LLC
(a)	2328 S. CONGRESS AVE.	(b	)2328 \$	S. CONGRESS AVE.
	Principal office address of limited liability company: ( <u>Note: MUST BE STREET ADDRESS</u> )			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	SUITE 2A		SUIE 2A	L
	WEST PALM BEACH, FL 33406		WEST F	PALM BEACH, FL 33406
	04/07/2016		L160000	69673
	Date of filing/registration in Florida	4.		Document number
(a)	KALLICHE, ANTHONY A.			
	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of Sta	le:
	2950 NORTH 28TH TERRACE			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			BINISIO
				III SIGR
	HOLLYWOOD	33020	·	VISION OF CON
				O CUR
(b)	Corporation Service Company Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>			- PR OF
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	<u>rynice au</u>	<u>11055</u> .	2: 42
	1201 Hays Street			10 ×
	<u>NEW</u> Registered Office Address:			_
				-
	Tallahassee	32301		_
cha nt w s/we	imited liability company is not organized under the lay nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	f the regis ability co of the lim	stered offic impany, it i ited liabilit	e and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
	ourdes Pineda-Garcia	Lour	rdes Pined	a-Garcia, Authorized Person
ignat	ture of a member or authorized representative of a member			Printed or typed name of signee
wisi obli nere	by accept the appointment as registered agent and age ons of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address. I fin writing of this change	v verforma	ance of miv	duties, and I am Tamiliar with and accer
	re of Registered Agent Corporation Service Company	By: Gr	ace E. Kii	rby, Asst. Vice President

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

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## 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.

I. Na	ame of the limited liability company: <u>CUSTOM PR</u>	OPERTY I	MANAGEME	NT, LLC		
2. (a)	2328 S. CONGRESS AVE.	(៦	) 2328 S.	CONGRESS AVE.		
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	、	/	tailing address of limited lia ( <u>Note: MAY BE POST O</u>	-	
	SUITE 2A		SUIE 2A			
	WEST PALM BEACH, FL 33406		_ WEST PA	ALM BEACH, FL 3340	6	<b>.</b> .
	04/07/2016		L1600006	9673		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)	KALLICHE, ANTHONY A.					
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State			:		
	2950 NORTH 28TH TERRACE					
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS	2			
					20	S
	HOLLYWOOD	FL <u>33020</u>	)		1917 AUG	SIC
<b>(b</b> )	Corporation Service Company				υG	NE C
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:				10	
					Ыd	
	1201 Hays Street				÷ T	Ω <sub>P</sub>
	NEW Registered Office Address:				- 42	AL
	Tallahassee	·L_32301				
the cha agent v was/wo	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 ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the street of t	of the regination of the regination of the line of the	stered office ompany, it is nited liability	and the business office hereby confirmed that company or as otherw	e of the the cha	registered ange(s)
/s/ L	ourdes Pineda-Garcia	Lou	rdes Pineda	-Garcia, Authorized Pe	rson	
Signa	ture of a member or authorized representative of a member			Printed or typed name of si	.gnee	
1 hans	by account the appointment of registered agent and a	ana ta aa	in this and	with I further words to	aanni	he with the

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.

<u>P 0</u> Signature of Registered Agent Corporation Service Company

ny By: Grace E. Kirby, Asst. Vice President

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

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