

ME000 104 910

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

(Business Entity Name)

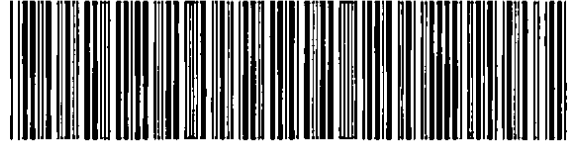
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CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

AUG 16 2019

S. YOUNG

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Clarion Capital, LLC

\_\_\_\_\_  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Evelyn Guzman

\_\_\_\_\_  
Name of Person

Realty Capital Advisors, LLC

\_\_\_\_\_  
Firm/Company

341 N Maitland Ave, ste 115

\_\_\_\_\_  
Address

Maitland, FL 32751

\_\_\_\_\_  
City/State and Zip Code

ap@realtycapitalfl.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lucy Sterman

407

843-7070

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
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

**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: Clarion Capital, LLC

2. (a) 129 Taft Dr  
Principal office address of limited liability company:  
(Note: MUST BE STREET ADDRESS)

(b) \_\_\_\_\_  
Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)

Unit 301

Sarasota, FL 34236

05/31/16

L16000104910

3. Date of filing/registration in Florida

4. Document number

5. (a) SG Registered Agent, LLC

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

200 E Palmetto Park Rd

Registered Office Address (Note: MUST BE FLORIDA STREET ADDRESS)

ste 103

Boca Raton, FL 33432

(h) Realty Capital Advisors, LLC

Enter name of NEW Registered Agent and/or NEW Registered Office address:

341 N Matiland Ave

NEW Registered Office Address:

ste 115

Maitland, FL 32751

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.

Nancy Mina  
Signature of a member or authorized representative of a member

Nancy Mina

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.*

Cheryl Grayman  
Signature of Registered Agent

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

FILED  
19 AUG 12 AM 7:08  
TALLAHASSEE, FLORIDA