L14000105182

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Business Entity Name)
((Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:
	·

Office Use Only



500305528015

11/13/17--01024--006 **25.00

2817 NOV 13 PM 3: 57

J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 9160 Bdeyn ST 11 C 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:
Aurelie Delahalle Name of Person
9160 Boleyn ST ILC Firm/Company
3838 SW 52rd Avenue Address
Halywood Fl 33023 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Aurelie Dolaholle at (754) 281 2819 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 & 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. Nam	ne of the limited liability company: 9160 Bdeyn ST LLC
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (b) 515 N. FLAGER DRIV Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
_	P300 P300
_	West Palm Beach, FL 33401 West Palm Beach, FL 33401
3.	Date of filing/registration in Florida 4. Document number
5. (a)	Kasa Property Management I.C. Legistered Agent and Registered Office shown on the records of the Florida Dept. of State:
R	SIS N. NAMER DRIVE Registered Office Address MUST BE FLORIDA STREET ADDRESS)
_	P300
_	West Palm Beach FL 33401
(b) _	Aurelie C. Delahalle
E	inter name of NEW Registered Agent and/or NEW Registered Office address:
	3838 SW 52nd Avenue 52 6
<u>.</u>	NEW Registered Office Address:
-	Hollywood FL 33023
the chang agent will was/were	aited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after ge or changes are made, the Florida street address of the registered office and the business office of the registered libe identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in es of organization or the operating agreement of the limited liability company.
_	cof a member or authorized representative of a member Printed or typed name of signee
I hereby provision the obliga- to merely notified in	accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the as of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept ations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed a change in the registered office address, I hereby confirm that the limited liability company has been in writing of this change.
Signature	of Registered Agent

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