## 16000186149

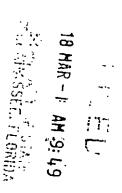
4 (	Requestor's Name)				
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates of 9	Status			
Special Instructions to Filing Officer:					
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## **COVER LETTER**

	COVER LETTER				
TO: Registration Section Division of Corporations					
Commercial Equity Partners Property Services, LLC SUBJECT:					
	f 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 m	atter to the following:				
Greg Kainz					
Name of Person					
Commercial Equity Partners Property Serv	vices, LLC				
Firm/Company	<del> </del>				
1971 Lee Rd.					
Address					
Winter Park, FL 32789					
City/State and Zip Code					
gkainz@cepadvisors.com					
E-mail address: (to be used for future annual	report notification)				
For further information concerning this matter, plea	ase call:				
Jim Gustner	407 405-0522				
Name of Person	Area Code & Daytime Telephone Number				
STREET/COURIER ADDRESS:	MAILING ADDRESS:				
Registration Section	Registration Section				
Division of Corporations	Division of Corporations				
Clifton Building	P.O. Box 6327				
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314				
Enclosed is a check for the following 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. N	ame of the limited liability company: Commercial I	Equity F	Partners	Property Services, LLC	
2. (a)			o)		
•	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	<del></del> (*	,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
•	1971 Lee Rd.		1971 L	ee Rd.	
	Winter Park, FL 32789		Winter	Park, FL 32789	
	June 1, 2016		L16000	106149	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	Sean Barth				
3. (u)	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of St	ate:	
	Sean Barth				
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
	1971 Lee Rd.				
	Winter Park, .FL	32789		<del>-</del>	
	0 00 0			<u>₽₩</u> <b>@</b>	
(b)	Candi Smith		<del></del>	- X	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office ad	<u>dress</u> :	(화 <u>+</u> )	
	Candi Smith			m	
	NEW Registered Office Address:				
	4812 New Broad Street			19 AUA NOAN	
	Orlando , FL	32814		_	
the cha agent v was/w	imited liability company is not organized under the lavange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liaere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	ws of the the regis ability co of the lim limited l	State of F stered offi empany, it ited liabil iability co	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in impany.	
		Bria	an Smith		
_	ture of a member or authorized representative of a member			Printed or typed name of signee	
provisi the obt to mer	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provide elv reflect a change in the registered office address, I din writing of this change.	performe d for in (	ance of my Chapter 60	y duties, and I am familiar with and accept 15 F.S. Or if this document is being filed	
Signatu	ire of Registered Agent				