

216000129620

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

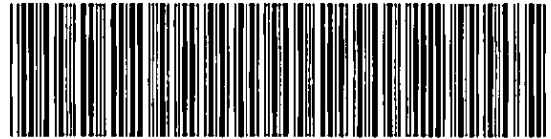
(Business Entity Name)

(Document Number)

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Sept. 28, 2018

Sent Via Federal Express: 7733 4997 8750

Dept. of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

RE: Stiles Corporation
Change of Registered Agent Forms
Our File: 17292.000

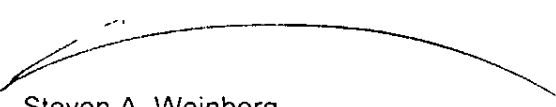
Dear Sir/Madam:

Enclosed please find Change of Registered Agent forms for our client, Stiles Corporation. These change forms have been executed by a representative of the Stiles Corporate entities as well as the new registered agent, David W. Black. I am also enclosing our firm's check #142873 in the amount of \$925.00 representing the filing fee for these entities along with a list of the entities to be filed.

Please file the enclosed at your convenience and thank you for your cooperation and assistance. If you have any questions please do not hesitate to contact me.

Sincerely,

FRANK, WEINBERG & BLACK, P.L.


Steven A. Weinberg,
for the Firm
SAW/km

Encls.

cc: Client
Steven W. Deutsch, Esq.

Div of Corp tr. Change of Reg. Agent forms Batch 2

7805 S.W. 6th Court • Plantation, FL 33324
Phone: 954-474-8000 • Fax: 954-474-9850 • www.fwblaw.net
Boca Raton • Daytona Beach • Plantation

COVER LETTER

TO: Registration Section Division of
Corporations

SUBJECT: 1212 Nashville Retail, 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:

Kathy Moro

Name of Person

Frank Weinberg Black, P.L.

Firm/Company

7805 SW 6th Court

Address

Plantation, FL 33324

City/State and Zip Code

Lynda.Watkins@Stiles.com KMoro@fwblaw.net

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

For further information concerning this matter, please call:

Lynda Watkins

Name of Person

at (954) 627-9350

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314 Tallahassee.

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: 1212 Nashville Retail, LLC

2. (a) ATTN: Lynda Watkins

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

301 E LAS OLAS BLVD

FT. LAUDERDALE, FL 33301

07/08/2016

(b) SAME

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

L16000129620

3. 07/08/2016 Date of filing/registration in Florida

4. L16000129620 Document number

5. (a) CORPORATION SERVICE COMPANY

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

1201 HAYS STREET

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

TALLAHASSEE, FL 32301

(b) FRANK WEINBERG & BLACK P.L.

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

7805 SW 6th Court

NEW Registered Office Address:

C/O DAVID BLACK, ESQ.

PLANTATION, FL 33324

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.

[Signature]
Signature of a member or authorized representative of a member

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.

[Signature]
Signature of Registered Agent

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