

L16000/56281

Division of Corporations

Page 1 of 2

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H18000040066 3)))



H180000400663ABCZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : FOX ROTHSCHILD LLP
Account Number : 120130000024
Phone : (215) 299-2162
Fax Number : (215) 299-2150

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: toppenheimer@foxrothschild.com

FILED
18 FEB -2 AM 9:28
TALLAHASSEE
FLORIDA

LLC REGISTERED AGENT CHANGE
ARGOS - DELTA INVESTMENTS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

RECEIVED

FEB 02 2018

J. LEGGETT
FEB 05 2018

Electronic Filing Menu

Corporate Filing Menu

Help

FAX AUDIT #H18000040066 3

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ARGOS - DELTA INVESTMENTS, 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:

THOMAS F. OPPENHEIMER

Name of Person

FOX ROTHSCHILD LLP

Firm/Company

2 S. BISCAYNE BLVD., SUITE 2750

Address

MIAMI, FL 33131

City/State and Zip Code

TOPPENHEIMER@FOXROTHSCHILD.COM

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

For further information concerning this matter, please call:

THOMAS F. OPPENHEIMER at (305) 442-6546

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

INHS18 (2/14)

FAX AUDIT #H18000040066 3

FAX AUDIT #H18000040066 3

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: ARGOS - DELTA INVESTMENTS, LLC

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
1500 CORAL RIDGE DR.
FORT LAUDERDALE, FL 33304

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
1500 CORAL RIDGE DR.
FORT LAUDERDALE, FL 33304

3. 08/19/2016
Date of filing/registration in Florida

4. 1.16000156281
Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State.
INCORPORATING SERVICES, LTD.

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
1540 GLENWAY DR.
TALLAHASSEE, FL 32301

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
RAFAEL J. VECCHIATTI
NEW Registered Office Address:
1500 CORAL RIDGE DR.
FORT LAUDERDALE, FL 33304

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 of a member or authorized representative of a member RAFAEL J. VECCHIATTI
Printed or typed name of signer

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 of Registered Agent

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

FILED
18 FEB - 2 AM 9:28
TALLAHASSEE, FLORIDA