

L16000165826

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.

((H16000248387 3))



H160002483873ABCS

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 : INCORP SERVICES INC  
Account Number : I20120000007  
Phone : (702)866-2500  
Fax Number : (702)866-2689

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
2017 OCT -6 A 9:18

FILED

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

Email Address: documents@incorp.com

LLC REGISTERED AGENT CHANGE  
415 NORTH B STREET, LLC

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

2017 OCT -6 PM 12:19

TALLAHASSEE, FLORIDA

S Warren

OCT 07 2016

H 16000 24838 10

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 415 NORTH B STREET, 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 Shin  
Name of Person

InCorp Services, Inc.  
Firm/Company

3773 Howard Hughes Pkwy · Suite 500S  
Address

Las Vegas, NV 89169-8014  
City/State and Zip Code

documents@incorp.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kathy Shin on behalf of InCorp Services, Inc. at ( 800 ) 246-2677  
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

H 16000 24838 13

*Handwritten scribbles*

**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: 415 NORTH B STREET, LLC

2. (a) 4371 Northlake Blvd, 305 Palm Beach Gardens, FL 33410 (b) 4371 Northlake Blvd, 305 Palm Beach Gardens, FL 33410  
Principal office address of limited liability company: Mailing address of limited liability company:  
*(Note: MUST BE STREET ADDRESS)* *(Note: MAY BE POST OFFICE BOX)*

3. 09/09/2016 Date of filing/registration in Florida 4. L16000165826 Document number

5. (a) NOVOSAD, ANASTASIA  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

4371 Northlake Blvd · 305  
Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*  
Palm Beach Gardens, FL 33410

(b) InCorp Services, Inc.  
Enter name of **NEW** Registered Agent and/or **NEW** Registered Office address:

17888 67th Court North  
**NEW** Registered Office Address:  
Loxahatchee, FL 33470

FILED  
2016 OCT - 6 A 9 18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.

Anastasia Novosad Anastasia Novosad  
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.*

Kathy Shin Kathy Shin on behalf of InCorp Services, Inc.  
Signature of Registered Agent

*Handwritten number: H160002483873*