

L170000010828

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

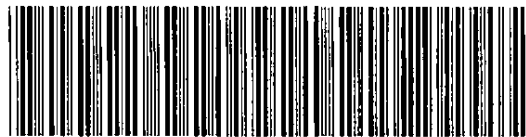
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400300270604

04/28/17--01013--002 **25.00

FILED
17 JUL 10 AM 11:49
CLERK OF COURT
TALLAHASSEE, FLORIDA

2017

**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: 10330 FOX TRAIL, LLC

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

1451 W CYPRESS CREEK ROAD SUITE 300
FORT LAUDERDALE, FL 33309

9858 GLADES ROAD, SUITE D3-218
BOCA RATON, FL 33434

01/13/2017

L17000010828

3. Date of filing/registration in Florida

4. Document number

5. (a) GROSS, ELISE

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

7710 LAGO DEL MAR DRIVE UNIT 504

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

BOCA RATON, FL 33433

(b) Vcorp Services, LLC

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

5011 South State Road 7, Suite 106

NEW Registered Office Address:

Davie, FL 33314

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 member or authorized representative of a member

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
17 JUL 10 AM 11:49
TALLAHASSEE, FLORIDA