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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: SRG Plantation 3, LLC

Name of Limited Liability Company

Dear Sir or Madam:

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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@twblaw.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 (<u>954)_627-9350_</u> Area Code & Davtime Telephone Number 0CI 24

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STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

MAILING ADDRESS:

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 BOTHFOR 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: <u>SRG Plantation 3, LLC</u>

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2.	(a)_/	ATTN: Lynda Watkins	_ (b)	SAME			
		Principal office address of limited liability company:			ailing address of limite		
		(<u>Note: MUST BE STREET ADDRESS</u>)		((<u>Note: MAY BE POS</u>	<u>ST OFFI</u>	<u>CE BOX</u>)
		301 E LAS OLAS BLVD	_				
		FT. LAUDERDALE, FL 33301	_				
		02/08/2017		L170	00031713		
3.		Date of filing/registration in Florida	4.	C	Document number	4 1 1	
						130 E	~ 1 1
5.	(a)	CORPORATION SERVICE COMPANY				10(
		Registered Agent and Registered Office shown on the records of th	e Florida l	Dept. of State:		5	
		1201 HAYS STREET				L,	
		Registered Office Address (MUST BE FLORIDA STREET AL	DRESS			υ	5
		Registered Childe Address JMOST BET LORIDA STREET AL	JURL33/			1	<u> </u>
		TALLAHASSEE FL 3	32301			\sim	
	(b)	FRANK WEINBERG & BLACK P.L.			¥-	ŝ	
	(0)	Enter name of <u>NEW Registered Agent and/or NEW Registered O</u>	ffice add	ess:			
		7805 SW 6th Court					
		<u>NEW</u> Registered Office Address:					
		C/O DAVID BLACK, ESQ.					
		PLANTATION FL_	33324				
the ag wa	e cha ent w is/we	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited liability authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	he regist ility com the limit mited lia	ered office a pany, it is he ted liability o ability comp	ind the business of ereby confirmed th company or as oth	ffice of hat the	the registered change(s)

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 of Registered Agent

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