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### **COVER LETTER**

INHS18 (2/14)

TO: Registration Section Division of Corporations	;	
·		Q- 1. 11 -
SUBJECT: 3 C	1 2. HUBION	d Liability Company
	Name of Limite	d Liability Company
Dear Sir or Madam:		
The enclosed Registered Agent/I	Registered Office Change	and fee(s) are submitted for filing.
Please return all correspondence	concerning this matter to	the following:
Pete Delgado Name o		
Name of	Person	
381. S F		
20 Carat	6.	71 0-1
32 COURT Addre	Street -	706
Addre	SS	
Proplety NY City/State a	1/201 nd Zip Code	- <del>-</del>
PSD AND LC Z E-mail address: (to be used	for future annual report r	notification)
For further information concerni	ng this matter, please call	:
Mark Scharf	f at (\$	18, 236.6065
Name of Person		Area Code & Daytime Telephone Number
STREET/COURIER A	DDRESS:	MAILING ADDRESS:
Registration Section	DUKESS.	Registration Section
Division of Corporation	š	Division of Corporations
Clifton Building		P.O. Box 6327
2661 Executive Center ( Tallahassee, Florida 323		Tallahassee, Florida 32314
Enclosed is a check for		
\$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 liabil	ity company: _	381.S A	UAJON	PANN LL	٥	
2. (a)			(t				
	·-	ress of limited liability  TBE STREET ADDR	• -		g address of limited liabil e: MAY BE POST OFF		
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3.	MALC!	registration in Flo	> / <b>1</b>		000 5 98 0	5 <i>9</i>	
	HAROLD	-	11ua 4.	Doce	mem number		
5. (a)/ Regist			the records of the Florida	Dept. of State:			
Regist	tered Office Address	(MUST BE FLOR	IDA STREET ADDRESS	2		person	
	133-15	BEACL (	Jannel Dic	<u> </u>			
	Zichan P	Ach FL	. FL				- 12 - 13 - 13 - 13 - 13 - 13 - 13 - 13 - 13
<del></del>	,	11	,			88	是是
(b)	Spal.	HAROLD	WARNER	<del></del>		7	
Enter	name of <u>NEW Regis</u>	<b>ered Agent</b> and/or <u>N</u>	EW Registered Office ad	<u>dress</u> :		ပ္မဲ့ ္	2007 2007
	3340 S	. AT LAN	tic Ave			26	
NEW	Registered Office A	Idress:	1	<del></del>			-
P	ATOna	dress: Basel	SHOKES				
			_, FL. 32	111	man managa a gana g Bagan		
If the limited	liability compan	y is not organized	under the laws of the et address of the regi	State of Florida,	it is hereby confirm	ed that after	r ered
agent will be	identical. Or, in	the case of a Flori	da limited liability co	ompany, it is here	by confirmed that th	e change(s)	)
was/were aut	norized by an air	irmative vote of the	te members of the lime tend in the limited in the l	liability company		_	ın
	whill)			MARK,	Scharff ed or typed name of signo		
		ed representative of a					
I hereby acc provisions of	ept the appointm all statutes relat	ent as registered a ive to the proper a	gent and agree to act nd complete perform it as provided for in ( e address, I hereby c	in this capacity. ance of my duties	I further agree to c , and I am familiar (	omply with vith and ac	the cept
tne obligation to merely ref	ns of my position lect a change in t		n as provided for in ( e address, I hereby c	Inapter 605, F.S. onfirm that the lii	Or, if this documen mited liability compo	t is being fi iny has bee	ued n
попунеа т wi	riti <b>s</b> ig of this char	ge. Mar					

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

Signature of Registered Agent

# Electronic Articles of Organization Florida Limited Liability Company

7000059869

### Article I

The name of the Limited Liability Company is:

381 S. AVALON PARK LLC

### Article II

The street address of the principal office of the Limited Liability Company is:

381 S AVALON PARK DR ORLANDO, FL. 32828

The mailing address of the Limited Liability Company is:

32 COURT STREET SIUTE 906 BROOKLYN, NY. 11201



### Article III

The name and Florida street address of the registered agent is:

HAROLD WARNER

obligations of my position as registered agent.

HAROLD WARNER

133-15 BEACH CHANNEL DR

ROCKAWAY PARK, FL. 11694

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. 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 states. agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the

Registered Agent Signature: HAROLD WARNER

DOAR FOLKS,

So Socry for the EXROR Too much suns (Au)