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.

(((H190001413363)))



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Doing so will generate another cover sheet.	

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 ; (323)962-8600 : (323)962-3889 Fax Number

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

Email	Address:	

## LLC REGISTERED AGENT CHANGE 1004 NW 18 AVE, LLC

Certificate of Status	0
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Estimated Charge	\$55.00

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## **COVER LETTER**

TO: Registration Section Division of Corporations					
SUBJECT: 1004 NW 18 AVE, LLC					
	of Limited Li	ability Company			
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office	e Change and	fee(s) are submitted for filing.			
Please return all correspondence concerning this	matter to the	following:			
Cheyenne Moseley					
Name of Person					
Legalzoom.com, Inc.					
Firm/Company		_			
101 N. Brand Blvd., 10th Floor					
Address		_			
Glendale, CA 91203					
City/State and Zip Code					
anne@212dentalcare.com					
E-mail address: (to be used for future annu	al report notif	ication)			
For further information concerning this matter, p	dease call:				
Cheyenne Moseley	800	773-0888 ext 9724			
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	MAH.ING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Enclosed is a check for the following amount:					
□ \$25 Filing Fee	<b>□</b> \$	55 Filing Fee & Certified Copy			
INHS18 (2/14)					

## 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.

ome of the limited liability company: 1004 NW 18	AVE, LLC:		
1004 NW 18 AVE	219/A TOWNER ACE DRIVE:		
Principal office address of limited liability company:  (Nate: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
BOCA RATON, FL 33486	BOĆA	RATON, FL 33433	
	·- · · ·		
05/24/2017	L17000	114971	
Date of filing/registration in Florida	4.	Document number	
KELLERMANN VARELA PL			
Registered Agent and Registered Office shown on the records of	the Florida Dept. of S	tate:	
605 LINCOLN RD STE 400		= 5	
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
		FILL APR 29	
MIAMI BEACH	33139	25. 9	
		_ 29 8	
Enter name of NEW Registered Agent and/or NEW Registered	Office address:	<u> </u>	
13302 WINDING OAK COURT, SUITE A	•	<b>9</b>	
		_	
TAMPA .FI	33612		
ange or changes are made, the Florida street address of will be identical. Orbit the case of a Florida limited liver appropriate by an affirmative vote of the members of less of a remainder of the operating agreement of the operating agreement of the observed of a number of a deput the appointment as registered agent and agricultures of any position as registered agent as provided to reflect a change in the registered office address, I are the proper and complete the proper and com	the registered off ability company, of the limited liab- limited liability of ANTHON' ree to act in this of performance of n d for in Chapter ( hereby confirm th	fice and the business office of the registered it is hereby confirmed that the change(s) illy company or as otherwise provided in company.  Y J SANTAMARIA  Britisted or typed name of signee	
	Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS)  BOCA RATON, FL 33486  05/24/2017  Date of filing/registration in Florida  KELLERMANN VARELA PL  Registered Agent and Registered Office shown on the records of the foot of the Address (MUST BE FLORIDA STREET)  MIAMI BEACH  UNITED STATES CORPORATION AGENTS  Enter name of NEW Registered Agent and/or NEW Registered  13302 WINDING OAK COURT, SUITE A  NEW Registered Office Address:  TAMPA  FI  Imitted liability company is not organized under the large or changes are made, the Florida street address of will be identical. Or jirt the case of a Florida limited light of the graph rived by an affirmative vote of the members of the strength of the proper and complete light for a provided registered agent as provided in writing of this change.  TAMPA (Here of the proper and complete the registered agent as provided in writing of this change.  CHEYENNE MOSELEY, ASSISTANT SECRETAR	Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS)  BOCA RATON, FL 33486  BOCA RATON, FL 33486  BOCA  05/24/2017  L 17000  Date of filling/registration in Florida  KELLERMANN VARELA PL  Registered Agent and Registered Office shown on the records of the Florida Dept. of S  605 LINCOLN RD STE 400  Registered Office Address  MUST BE FLORIDA STREET ADDRESS)  MIAMI BEACH  FL 33139  UNITED STATES CORPORATION AGENTS, INC.  Enter name of NEW Registered Avent and/or NEW Registered Office address:  13302 WINDING OAK COURT, SUITE A  NEW Registered Office Address:  TAMPA  FL 33612  Imited liability company is not organized under the laws of the State of any location of the difficulty of the case of a Florida limited liability, company, the application for the operating agreement of the limited liability of a general point of the difficulty of the case of a Florida limited liability of a general point of the operating agreement of the limited liability of a florida state of the proper and complete performance of a liquidos of my position as registered agent as provided for in Chapter thy reflect o change in the registered of general address. Thereby confirm the diverting of this change.  CHEVENE MOSELEY, ASSISTANT SECRETARY: UNITED	