L17000170323

(Requestor's Name)						
(Address)						
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(4)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(During and Father Name)						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
						
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600319183646

10/03/18--01013--001 **\$25.00







October 15, 2018

kathy moro 7805 sw 6th court plantation, FL 33324

SUBJECT: S/F MIRAMAR, LLC Ref. Number: L17000170323

We have received your document for S/F MIRAMAR, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please type or print name of signee.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott Regulatory Specialist II

Letter Number: 218A00020979

(D)

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.	N	ame of the limited liability company: <u>S/F Mi</u>	ramar. LLC			
2.	(a)	ATTN: Lynda Watkins		(b) SAME		
	. ,	Principal office address of limited liability com		` '	Mailing address of lim	nited liability company:
		(<u>Note: MUST BE STREET ADDRESS</u>	()		(Note: MAY BE PO	<u>OST OFFICE BOX</u>)
		301 E LAS OLAS BLVD				
		FT. LAUDERDALE, FL 33301			· •	
		08/09/2017		L	17000170323	
3.		Date of filing/registration in Florida	4.		Document number	
5.	(a)	CORPORATION SERVICE COMPANY				
	ν	Registered Agent and Registered Office shown on the	records of the Flo	orida Dept. of St	g 17	
					•	
		1201 HAYS STREET				5 F
	Registered Office Address (MUST BE FLORIDA STREET A			DRESS)		
		TALLAHASSEE	. FL 3230) [~	
	(b)	FRANK WEINBERG & BLACK P.L.			<u> </u>	. 0
	(-)	Enter name of NEW Registered Agent and/or NEW I	Registered Office	address:		
		7005 010 (4) 0				
		7805 SW 6th Court NEW Registered Office Address:			_ _	
		Registered Office Address:				
		C/O DAVID BLACK, ESQ.			<u></u>	
		<u>PLANTATION</u>	, FL_ <u>3332</u>	24		
1.0	. 1	r santana				
II the	tne - ch	limited liability company is not organized und ange or changes are made, the Florida street ac	er the laws of t ddress of the re	the State of F	lorida, it is hereby one and the business	confirmed that after
ag	ent	will be identical. Or, in the case of a Florida li	mited liability	company, it	is hereby confirmed	that the change(s)
W	is/w	ere authorized by an affirmative vote of the m	embers of the	limited liabil	ity company or as o	therwise provided in
tne	e art	icles of organization or the operating agreeme		•	• •	
_				POBELT	ESPOSITO Printed or typed nan	1
:	Sign	ature of a member or authorized representative of a memb			• •	•
1	here	by accept the appointment as registered agent	t and agree to	act in this ca	pacity. I further agr	ee to comply with the
the	ovis 2 ob	ions of all statutes relative to the proper and c ligations of my position as registered agent as	complete perjoi provided for i	rmance oj my in Chapter 60	y auties, ana 1 am ja 95, F.S. Or, if this do	ımınar wun ana accept ocument is heing filed
to no	mer tifia	by accept the appointment as registered agent ions of all statutes relative to the proper and c ligations of my position as registered agent as rely reflect a change in the registered office ad all in writing of this change.	ldress, I héreby	v confirm tha	t the limited liability	y company has béen
,	- :/ • 4	I I I I I				
Si	gnati	ure of Registered Agent				