

L17000256279

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

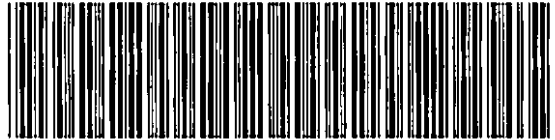
(Business Entity Name)

(Document Number)

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RECEIVED
MAR 12 2018

FILED
2018 MAR 12 A 10:13
DALLAS COUNTY, TEXAS

D. SCOTT
MAR 14 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Brickell Park Capital, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

George Riggs
Name of Person

Brickell Park Capital
Firm/Company

1548 Brickell Ave
Address

Miami, FL
City/State and Zip Code

griggs@brickellparkcapital.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

George Riggs at (305) 857-0734
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

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

FILED
2018 MAR 12 A 10:13
TALLAHASSEE, FLORIDA
FALLS AVE. REGISTRATION

**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: Brickell Park Capital, LLC

2. (a) Brickell Park Capital, LLC (b) Brickell Park Capital, LLC

Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)

1548 Brickell Ave

Miami, FL 33129

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

1548 Brickell Ave

Miami, FL 33129

12/15/2017

L17000256279

3. Date of filing/registration in Florida

4. Document number

5. (a) James Sellers

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

2333 Feather Sound Drive

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

B205

Clearwater, FL 33762

(b) Registered Agents Inc.

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

3030 N. Rocky Point Dr.

NEW Registered Office Address:

STE 150A

Tampa, FL 33607

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]
Signature of a member or authorized representative of a member

James Sellers
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.

Bill Havre
Signature of Registered Agent

Bill Havre - Assistant Secretary