

L18000097905

Florida Department of State
Division of Corporations
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**LLC REGISTERED AGENT CHANGE
NORTH F STREET APARTMENTS LLC**

Certificate of Status	0
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Estimated Charge	\$25.00

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TALLAHASSEE, FLORIDA

K. SALY
MAY 10 2018

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.014 or 605.016, Florida Statute, 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: NORTH F STREET APARTMENTS LLC

2. (a) _____ (b) _____

Principal office address of limited liability company.

Mailing address of limited liability company.

(Note: MUST BE STREET ADDRESS)

(Note: MAY BE POST OFFICE BOX)

235 NE 4TH AVE, STE 101

235 NE 4TH AVE, STE 101

DELRAY BEACH, FL 33483

DELRAY BEACH, FL 33483

Filed 4/20/18, Effective 4/18/18

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3. _____ 4. _____

Date of filing/registration in Florida

Document number

5. (a) NORTH F STREET APARTMENTS MANAGER LLC

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

Registered Office Address: MUST BE FLORIDA STREET ADDRESS

235 NE 4TH AVE, STE 101

DELRAY BEACH FL 33483

(b) _____

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

James A. Walker

NEW Registered Office Address:

18301 127th Drive North

Jupiter FL 33478

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 of a member or authorized representative of a member

Patrick A. Ford, Manager of Manager

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 consequences 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 continuously maintained in good standing.

Signature of Registered Agent

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

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18 MAY -9 AM 10:45
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TALLAHASSEE, FLORIDA