L18000143895

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300373648223

09 24/21--01029--020 **25.00



FILED



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 721 PYC 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:
Lauren Sturgs Name of Person
Native Management Firm/Company
1926 E Sunse Blud Address
Fort Wilderdale F2 33304 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (954) 593 8090 Area Code & Daytime Telephone Number
Mailing Address:Street Address:Registration SectionRegistration Section
Division of Corporations P.O. Box 6327 Division of Corporations The Centre of Tallahassee
Tallahassee, FL 32314 Tallahassee, FL 32314 Tallahassee, FL 32303
Enclosed is a check for the following amount:
\$25 Filing Fee \$\square\$ \$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.

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: 721 Ave LLC
2. (a) 1926 E Surise Blud Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) First Laurendale Ft 33304 (b) 1926 E Surise Blud Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) Furt Laurendale Ft 33304
Col 11 2018 L 18000 143 895 Date of filing/registration in Florida 4. Document number 5. (a) Movtgage X LLC
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
120 Nighthawk Aug Registered Office Address (MUST BE FLORIDA STREET ADDRESS) Plantation FL 33324
Thomas Strings
taller hame of the W Registered Agent and of the Registered Office address.
1920 E SUNTSE BIVE NEW Registered Office Address:
Fort Lauderdale FL 33304
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 of authorized representative of a member Printed or typed name of signee
Signature of a member of authorized representative of a member 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.