118000210713

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SECRETARY OF STAIL

COVER LETTER . . .

TO:	Registration Section Division of Corporations		•				
SUBJI	30 NORTH PARK LLC						
		Name of Limited I	iability Company				
Dear S	ir or Madam:						
The en	closed Registered Agent/Registered	l Office Change and	I fee(s) are submitted for filing.				
Please	return all correspondence concernir	ng this matter to the	following:				
JOSEP	H HOFFER						
	Name of Person		_				
30 NOI	RTH PARK LLC						
	Firm/Company						
525 WI	EST PLANT ST						
	Address		_				
WINTE	ER GARDEN, FL 34787						
	City/State and Zip Co	de					
JOE@G	CYNERGREEN,COM						
E	-mail address: (to be used for future	annual report notif	ication)				
For fur	ther information concerning this ma	atter, please call:					
JOSEPI	H HOFFER	407 ai (5588166				
	Name of Person	u. (Area Code & Daytime Telephone Number				
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
	Enclosed is a check for the follow	ving amount:					
	■ \$25 Filing Fee	□ \$	55 Filing Fee & Certified Copy				
INHS18	3 (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.

l. Na	me of the limited liability company: 30 NORTH PARK	LILL			
2. (a)	525 WEST PLANT ST		(b) _	25 WEST PLAN	T ST
·· (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(-,_	-	ddress of limited liability company: MAY BE POST OFFICE BOX)
	WINTER GARDEN, FL 34787	_	<u> </u>	INTER GARDE	N, FL 34787
	9/04/2018		L18	8000210713	
i. (a)	Date of filing/registration in Florida DANELLE HOFFER	4.		Docum	nent number
. (4)	Registered Agent and Registered Office shown on the records of to 525 WEST PLANT ST	he Flori	ida De	pt. of State:	
	Registered Office Address (MUST BE FLORIDA STREET A	(DDRE	<u>SS)</u>		
	WINTER GARDEN FL	34787			2021 SEC TALL
(b) _	JOSEPH HOFFER				FILED PALLANASSEE, FIG
	Enter name of NEW Registered Agent and/or NEW Registered Office address:			<u>is</u> :	RETARY OF
	#285, 18981 US HWY 441				PH 5
	NEW Registered Office Address:				3. 30 Grand
	MOUNT DORA, FL	32757			
hange gent w vas/we	mited liability company is not organized under the law or changes are made, the Florida street address of the /ill be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members of less of organization or the operating agreement of the	registe bility of f the li limited	red o comp mited I liabi	ffice and the bu any, it is hereby I liability compa	siness office of the registered confirmed that the change(s)
•	ure of a member or authorized representative of a member				or typed name of signee
rovisio he obli o mere	oy accept the appointment as registered agent and agro ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I h I in writingjof fhis change.	ee to a perform for in ereby	ct in t nance Chaj confi	his capacity. I e of my duties, a oter 605, F.S. C rm that the limit	further agree to comply with the and I am familiar with and accept Or, if this document is being filed ted liability company has been