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(Req	uestor's Name)	
(Addi	ress)	
(Addi	acc)	
(Addi	C33)	
(City/	State/Zip/Phone	#)
	_	
PICK-UP	MAIT	MAIL
(Rusi	ness Entity Nam	16)
(003)	ness Entry Hair	10)
(Doci	ument Number)	
Certified Copies	Certificates	of Status
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Special Instructions to Fi	ling Officer:	

Office Use Only



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SEUR. BAÑY OF STATE TALLAHASSEE, FLORIDA

TILED

16,33



One Tampa City Center, Suite 2000 201 N. Franklin Street P.O. Box 1531 (33601) Tampa, Fl. 33602 813.273.4200

WWW.MFMLEGAL.COM

EMAIL: INFO@MFMLEGAL.COM

625 Court Street, Suite 200 P.O. Box 1669 (33757) Clearwater, FL 33756 727.441.8966

June 14, 2023

VIA USPS CERTIFIED MAIL 7022 2410 0002 1929 3352

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

RE: Registered Agent Change Forms

Dear Sir/Madam:

Enclosed please find the Registered Agent Change Forms for the below listed entities. A firm check for the total is also enclosed.

- 1. James Ramos, PLLC
- 2. Ramos Development, LLC
- 3. Bay to Bay Asset Management, LLC
- 4. Ramos Investment Growth Fund III, LLC
- 5. 8525 N Montague, LLC
- 6. Gramercy Court Phase 2, LLC
- 7. Gramercy Court Phase 3, LLC
- 8. Gramerev Court Phase 4, LLC
- 9. 504 Moody, LLC
- 10, 520 74th Street, LLC
- 11, 2409 MacDill, LLC
- 12. 3100 San Carlos LLC
- 13. Park and Ola Development, LLC
- 14. Enoteca Wine Storage LLC
- 15, 5706 MacDill LLC
- 16. West Hyde Place at Soho Townhome Association, Inc.
- 17. Park and Ola Townhome Association, Inc.

Division of Corporations Change of Registered Agent Forms June 14, 2023

Please contact our office should you have any questions or need anything further. I can be reached via e-mail at <u>LMM@MACFAR.COM</u> or telephone at 813-273-4200, ext. 4255.

Sincerely

Lindsey Wise

Paralega\

Enclosures

COVER LETTER

	istration Section sion of Corporations		
SUBJECT:	JAMES RAMOS, PLLC		
SUBJECT.		Name of Limited L	Liability Company
Dear Sir or l	Madam:		
The enclosed	d Registered Agent/Registered (Office Change and	I fee(s) are submitted for filing.
Please return	n all correspondence concerning	this matter to the	following:
James Ramo	s		
	Name of Person		
Ramos Com	panics		
	Firm/Company		
5706 S MacI	Dill Ave Suite 200		
	Address		-
Tampa FL 3	3611	_	
	City/State and Zip Coo	ie	
jr@ramosco	mpanies.com		
E-mai	address: (to be used for future	annual report noti	fication)
For further	information concerning this ma	tter, please call:	
James Ramo	os	813 at (259-1111
	Name of Person		Area Code & Daytime Telephone Number
Reg Div P.C	niling Address: gistration Section vision of Corporations D. Box 6327 Ilahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
En	closed is a check for the follow	ving amount:	
a :	\$25 Filing Fee	0	\$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.

Nai	me of the limited liability company:	S, PLLC							
(a)	c/o Ramos Companies	(b)(b)							
(") -	Principal office address of limited liability company: (Note; MUST BE STREET ADDRESS)		. ,		Mailing address				r:
	5706 S MacDill Ave 5úte 200		5	706 S M	dacDill Ave Súte	200			
	Tampa, FL 33611		1	ampa, I	FL 33611				
	10/16/2018		LI	800023	8255				
	Date of filing/registration in Florida	4.			Document no	ımber			
(a)	GOODWIN, JAMES W								
(a)	Registered Agent and Registered Office shown on the records of	f the Flori	da De	pt. of St	ate:				
	201 N. Franklin St								
	Registered Office Address (MUST BE FLORIDA STREE)	ADDRES	<u>55)</u>				=	2	
	Suite 2000) L L	123	
	Tampa	L33602					À I	2023 JUN 2 I	7
	-		•		_		XR)	2	
(b)	RAMOS, JAMES A				_		m _{C:}	PH	[i
	Enter name of NEW Registered Agent and/or NEW Registered	d Office a	<u>ıddre</u>	<u> </u>			FL	-	
	c/o Ramos Companies						IATE ORID	1: 08	_
	NEW Registered Office Address:						Þ	-	
	5706 S MacDill Ave 5ute 200	<u> </u>							
	Tampa	., 33611							
	, F	L_33011							
ange ent w is/we afti	mited liability company is not organized under the least or changes are made, the Florida street address of the relational of the case of a Florida limited authorized by an affirmative vote of the members cless of organization or the operating agreement of the latest actions of the company	e registe liability of of the li e limited	ered comp mite I Iiab	office a pany, it d liabil	and the business is hereby conflity company of ompany.	s office irmed r as oth	e of the r that the c nerwise p	egistere :hange(ed s)
-	ure of a member or authorized representative of a member				Printed or type		_	_, <i>t</i>	LJ
herel ovisi obli merc tified	by accept the appointment as registered agent and a ons of all statutes relative to the proper and complet igations of my position as registered agent as provid homeleasts change in the registered office address, I in writing of this change.	gree to a e perfori led for in I hereby	ct in mand Cho conf	this ca ce of m opter 60 irm tha	ppacity. I further y duties, and L y duties, and L 05, F.S. Or, if in at the limited lid	er agre am fan this do ability	e to com illiar wit cument i company	ply wit. h and a s being has be	h the iccep filed en
, (·	e of Registered Agent								