## L19000141993

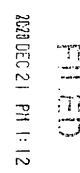
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## **COVER LETTER**

	Registration Section Division of Corporations		·
SUBJE	EE Utab Zion, LLC		
	,	Name of Limited	Liability Company
Dear Sir	or Madam:		
The enc	losed Registered Agent/Registered	Office Change ar	nd fee(s) are submitted for filing.
Please r	eturn all correspondence concerning	this matter to th	e following:
Martin V	V. Katz, Esq.		
	Name of Person		<del></del>
Katz &	Doorakian Law Firm, P.L.		
	Firm/Company		<del></del>
625 N. I	Flagler Drive, Suite 605		
	Address		<del></del>
West Pa	ılm Beach, Florida 33401		
******	City/State and Zip Coo	le	<del></del>
mkatz@	)katzlawpl.com		
E-	mail address: (to be used for future	annual report no	tification)
For furt	ther information concerning this mat	tter, please call:	
Elizabet	th Rad	516 at (	652-7585
	Name of Person		Area Code & Daytime Telephone Number
	Mailing Address:		Street Address:
	Registration Section		Registration Section
	Division of Corporations		Division of Corporations
	P.O. Box 6327		The Centre of Tallahassee
	Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the follow	ing amount:	
	■ \$25 Filing Fee		\$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.

Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)  250 ROYAL PALM WAY, STE. 306		Mailing address o	flimited liability	company?		
		(Note: MAY.B	(b)			
250 110 1112 1112 1111	2	50 ROYAL PALM WAY				
PALM BEACH, FL 33480	 P	ALM BEACH, FL 33480	<u> </u>	<del></del>		
5/28/2019	Ll	9000141993				
Date of filing/registration in Florida	4.	Document nu	mber			
Registered Agent and Registered Office shown on the records	of the Florida De	pt. of State:				
RAD, ELIZABETH						
Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS).					
250 ROYAL PALM WAY, SUITE 306			;	يہ		
PALM BEACH	FL_33480			76.50 DE (	• • • •	
	r L	<del></del>			``.	
			;; ;;	<u>~</u>	1 -42.01	
Enter name of NEW Registered Agent and/or NEW Register	ed Office addr	<del>2</del> 22:	7	PM :	t	
Martin V. Katz, Esq.				<u></u> '	د. سن <del>د.</del> از پ	
NEW Registered Office Address:			•	12		
625 N. FLAGLER DRIVE STE 605						
<u> </u>	<u>.                                    </u>					
WEST PALM BEACH	FL <sup>33401</sup>					
	- <del></del>	<del></del>		_		
mited liability company is not organized under the or changes are made, the Florida street address of t	laws of the Si	rate of Florida, it is here	eby confirmed office of the	that afte registere	er ti d	
ill be identical. Or in the case of a blorida limited	liability com	pany, it is nereby colu-	litten mar me	cuarisc(2	"	
re authorized by an affirmative vote of the member	's of the limit	ed liability company or	aș otherwise	provided	111	
1 MI 1		eth Rad				
ure of a member or authorized representative of a member		Printed or type	d name of signee	<del></del>		
by accept the appointment as registered agent and a cons of all statutes relative to the proper and comple gations of my position as registered agent as provi by reflect a change in the registered office address, in writing of this change	ngree to act in te performan ded for in Ch I hereby con	n this capacity. I furthe ce of my duties, and I o apter 605, F.S. Or, if t firm that the limited lia	r agree to con un familiar wi his document ibility compan	nply with th and ac is being j y has bee	i thi cce file en	
111	-					

**FILING FEE: \$25.00** 

INHS18 (2/14)