

Florida Department of State

L22 000364152

Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : CAPITOL SERVICES, INC.
Account Number : I20160000017
Phone : (855)498-5500
Fax Number : (800)432-3622

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC REGISTERED AGENT CHANGE PENSACOLA CORNERS LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

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Corporate Filing Menu

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TALLAHASSEE, FL

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H22000393438

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pensacola Corners 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:

Harry Spitzer

Name of Person

Pensacola Corners LLC

Firm/Company

1901 W. Cypress Creek Road, Suite 102

Address

Fort Lauderdale, FL 33309

City/State and Zip Code

harry@hscapitalfund.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mathew H. Jacobson, Esq.

at (305)

539-7372

Name of Person

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 following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

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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.

1. Name of the limited liability company: Pensacola Corners LLC
2. (a) 1901 W. Cypress Creek Road, Suite 102
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
Fort Lauderdale, FL 33309
- (b) 1901 W. Cypress Creek Road, Suite 102
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
Fort Lauderdale, FL 33309
3. August 18, 2022
Date of filing/registration in Florida
4. L22000364152
Document number
5. (a) HS Capital Fund Inc
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
1901 W. Cypress Creek Road
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Suite 102
Fort Lauderdale, FL 33309
- (b) OH RE Manager LLC
Enter name of NEW Registered Agent and/or NEW Registered Office address:
NEW Registered Office Address:
1901 W. Cypress Creek Road, Suite 102
Fort Lauderdale, FL 33309

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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]
Signature of a member or authorized representative of a member

Harry Spitzer
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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely effect a change of the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]
Signature of Registered Agent

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