L24000314820

(Requestor's Name)
(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:
openial instructions to 1 amy officer.
NIC

Office Use Only



400433287454

2024 SEP -5 PH 1: 57

Bm 9/5/24

COVER LETTER

【.

INHS18 (2/14)

TO: Registration Section Division of Corporations				
subject:Lehigh_	4717/47/8 LLC Name of Limited Liability Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Regi	istered Office Change and fee(s) are submitted for filing.			
Please return all correspondence con	neerning this matter to the following:			
Stephen Tulla Name of Per	erson		2024 SEI	_
Firm/Compa	any		2024 SEP -5 PM	֡֝֝֜֜֝֟֝֜֝֟֝֜֜֝֟֝֜֜֝֟֜֜֟֝֓֓֓֓֓֓֜֜֜֜֟֜֜֜֜֜֡֓֓֡֡֡֡֜֜֜֜֡֡֡֡֡֡֡֡֡֡
2805E Oakland P	and Bird Suite Soci		PM 1:57	(
Fort Lauderdeile, FL City/State and Z	33306 Zip Code			
Stephen & Gratite E-mail address: (to be used for	ude 55. cm future annual report notification)			
For further information concerning the	this matter, please call:			
Stephen Tulloch Name of Person	at (<u>305</u>) <u>987-4455</u> Area Code & Daytime Telepho	one Num	 ber	
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, Sui Tallahassee, FL 32303	ite 810		
Enclosed is a check for the	following amount:			
☐ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy			

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.

	ume of the limited liability company: Lehigh 47/7/47/8 UC (b)
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	2805 E cakton of park Bladstosco 2605 E ockland park Bladso
	Fort Landardale, El 33306 Fort Landorday EL 38306
3.	
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
(b)	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 2805 E ag kilgn if Pan k Biril Scitce 500 Fact Lander Lete. FL 33366 Stronger Toligib Enter name of NEW Registered Agent and/or NEW Registered Office address:
	2805 E oakland park Blvd. Site 500 NEW Registered Office Address:
	Fort Landordele ,FL 33306
change igent v vas/wo he arti Signa I herel provisi he obl o mere	mited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the or changes are made, the Florida street address of the registered office and the business office of the registered will be jet nical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) are altivorized by an affirmative vote of the members of the limited liability company or as otherwise provided in flesh organization or the operating agreement of the limited liability company. Stylic Indiana or the proper and complete performance of my duties, and I am familiar with the gations of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept gations of the properties agent as provided for in Chapter 605, F.S. Or, if this document is being filed by reflect a change in the registered office address, I hereby confirm that the limited liability company has been in friging of this change.

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