## Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

EXAMINER

From:

Account Name : BILZIN SUMBERG BAENA PRICE & AXELROD LLP

Account Number : 075350000132 Phone : (305)374-7580 Fax Number : (305)351-2122

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## LLC REGISTERED AGENT CHANGE EAST TAMPA, LLC

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Electronic Filing Menu

Corporate Filing Menu

Help

H10000120748 3 REF

H10000120748 3

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Burniant to the previous of sections 602 Alf. on 60.	8 508 Florida Statutes the understaned limited
Pursuant to the provisions of sections 608.416 or 600 liability company submits the following statement in or agent, or both, in the State of Florida.	nder to change its registered office or registered
1. Name of the limited liability company:	East Tampa, LLC
2. (a) Principal office address of limited liability compa	any:
(Note: MUST BE STREET ADDRESS)	200 S. Park Road, Sulte 301 Hollywood, Fl. 33021
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	200 S. Park Road, Suite 301 Hollywood, FL, 33021
10/20/2006	M0600005829
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown of	on the records of the Florida Dept. of State;
Registered Agent:	Seth Werner
Registered Office Address:	200 S, Park Road
<del>-</del>	Sulte 301 Hollywood, FL 33021
(b) Buter name of <u>NEW Registered Agent</u> and/or <u>N</u> <u>NEW</u> Registered Agent:	Seth Wise
NEW Registered Office Address:	100 W. Cypress Creek Road
MUST BE FLORIDA STREET ADDRESS	Fort Lauderdale ,FL33309
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ide liability company, it is hereby confirmed that the change of the members of the limited liability company or as other the operating agreement of the limited liability company of the limited liability company.  Signature of a member or anthorized representative of a member	e laws of the State of Florida, it is hereby Florida street address of the registered office intical. Or, in the case of a Florida limited (s) was/were authorized by an affirmative vote erwise provided in the articles of organization ny.
Seth Werner Printed or typed name of signee	_
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p and I am familiar with and accept the obligations of my p Chapter 608, F.S. Or, if this document is being filed to the address, I hereby confirm that the limited liability compa	agree to got in this copacity. I further agree to proper and complete performance of my duties, notified as provided for in serily reflect a change in the registered affice my has been notified in writing of this change?
Signature of Registered Agent	CRE AHY
Division of Corporations, P.O. Box 6 FILING FEE;	327, Tallabassee, FL 32314
HH18 (05/08)	
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