

MOY000002714

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

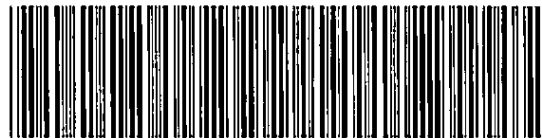
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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600327111496

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AND  
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2019 MAR 29 AM 8:40  
SECOND CLERK OF STATE  
TALLAHASSEE, FLORIDA  
03/29/19--01007--008 \*\*335.00

19 MAR 29 6:11:38

T.G.  
4/10/19

# SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

DATE 3/29/2019

**\*\*WALK IN\*\***

ENTITY NAME LAKE VISTA JACKSONVILLE OFFICE SUITE LLC

DOCUMENT NUMBER \_\_\_\_\_

**\*\*PLEASE FILE THE ATTACHED AND RETURN\*\***

XXXXX

*Plain Copy*

*Certified Copy*

*Certificate of Status*

APPROVED  
AND  
FILED  
2019 MAR 29 AM 8:40  
SECRETARY OF STATE  
TALLAHASSEE, FL (000)

**\*\*PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY\*\***

*Certified Copy of Arts & Amendments*

*Certificate of Good Standing*

**\*\*APOSTILLE' / NOTARIAL CERTIFICATION\*\***

COUNTRY OF DESTINATION \_\_\_\_\_

NUMBER OF CERTIFICATES REQUESTED \_\_\_\_\_

TOTAL OWED \$25.00

CHECK # 5954

Please call Tim at the above address for a more complete description of the services available.

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: Lake Vista Jacksonville Office Sulte LLC

2. (a) Principal office address of limited liability company:  
(Note: MUST BE STREET ADDRESS)  
14 Franklin Street, Sulte 800  
Rochester, NY 14604

(b) Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)  
14 Franklin Street, Suite 800  
Rochester, NY 14604

3. 5/8/2007 Date of filing/registration in Florida

4. M07000002714 Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Incorporating Services, Ltd

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1540 Glenway Drive

Tallahassee, FL 32301

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

United Corporate Services, Inc.

NEW Registered Office Address:

9200 South Dadeland Blvd. Ste. 508

Miami, FL 33156

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.

Christene Bootes  
Signature of a member or authorized representative of a member

Christene Bootes  
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 reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Michael A. Barr, President  
Signature of Registered Agent

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

APPROVED  
AND  
FILED

2019 MAR 29 AM 8:40  
SECRETARY OF STATE  
TALLAHASSEE, FL 32301