## M07000002977

(Requestor's Name)			
(Address)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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**B. KOHR** 

AUG 1 6 2011

**EXAMINER** 



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08/15/11--01023--002 \*\*600.00



## **COVER LETTER**

TO:	Registration Section Division of Corporations	
SUBJ	JECT: AZL	JRE WINTER PARK LLC
	Name o	of Limited Liability Company
Dear	Sir or Madam:	d Office Change and fee(s) are submitted for filing.
The e	nclosed Registered Agent/Registered	d Office Change and fee(s) are submitted for filing.
Please	e return all correspondence concerni	•
	ELISABETH ALONSO	)
,	Name of Person	
	MCKINLEY, INC.	
	Firm/Company	
	320 N MAIN STREET SUITE Address	<u> 200</u>
	ANN ARBOR, MI 4810 City/State and Zip Code	4
Ē	ealonso@mckinley.cor -mail address: (to be used for future annual repo	n rt notification)
For fu	orther information concerning this m	atter, please call:
	Elisabeth Alonso	at (
	Name of Person	Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS:	MAILING ADDRESS:
	Registration Section	Registration Section
	Division of Corporations	Division of Corporations P.O. Box 6327
	Clifton Building 2661 Executive Center Circle	Tallahassee, Florida 32314
	Tallahassee, Florida 32301	Talialiassee, Florida 32314
	Enclosed is a check for the follow	ving 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 608.416 or 608.508, 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.

Name of the limited liability company:	AZURE WINTER PARK LLC		
2. (a) Principal office address of limited liability comp	pany: 320 N MAIN STREET SUITE 200		
(Note: MUST BE STREET ADDRESS)	ANN ARBOR, MI 48104		
(b) Mailing address of limited liability company:	320 N MAIN STREET SUITE 200		
(Note: MAY BE POST OFFICE BOX)	ANN ARBOR, MI 48104		
5/18/2007	M0700002977		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of			
Registered Agent:	KATHY HENSLEY		
Registered Office Address:	4401 S KIRKMAN ROAD		
	ORLANDO, FL 32811		
(b) Enter name of <b>NEW Registered Agent</b> and/or <u>I</u>			
NEW Registered Agent:	HARRY COLLISON		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	180 S KNOWLES AVENUE SUITE 3		
(MOST BE PLORIDA STREET ADDRESS)	WINTER PARK ,FL 32789		
If the limited liability company is not organized under to confirmed that after the change or changes are made, the and the business office of the registered agent will be in liability company, it is hereby confirmed that the change of the members of the limited liability company or as of or the operating agreement of the limited liability company.	he laws of the State of Florida, it is hereby to Florida street address of the registered office lentical. Or, in the case of a Florida limited to(s) was/were authorized by an affirmative vote therwise provided in the articles of organization tany.		

Signature of a member or authorized representative of a member

CHERYL RABBITT

Printed or typed name of signee

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 608, 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.

Signature of Registered Agent