

**MD9000002052**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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

**L. SELLERS**

APR 27 2011

From:  
Account Name : MCDONALD HOPKINS CO., PA  
Account Number : I20050000183  
Phone : (561) 472-7510  
Fax Number : (561) 472-2975

**EXAMINER**

\*\*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  
BUSH REALTY, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

RECEIVED

11 APR 26 PM 4:46

SECRETARY OF STATE  
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TALLAHASSEE, FLORIDA

11 APR 26 AM 10:48

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Bush Realty, 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:

Jaimie Paul  
Name of Person

McDonald Hopkins, LLC  
Firm/Company

505 S. Flagler Drive, #300  
Address

West Palm Beach, Florida 33401  
City/State and Zip Code

jpaul@mcdonaldhopkins.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jaimie Paul at ( 561 ) 472-2121  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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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 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.

1. Name of the limited liability company: Bush Realty, LLC

2. (a) Principal office address of limited liability company: The Biltmore Hotel

(Note: **MUST BE STREET ADDRESS**)

1200 Anastasia Avenue, Suite 500  
Coral Gables, FL 33134

(b) Mailing address of limited liability company: \_\_\_\_\_

(Note: **MAY BE POST OFFICE BOX**)

6/1/09

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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 State:

Registered Agent:

Raquel A. Rodriguez

Registered Office Address:

201 S. Biscayne Blvd., Suite 2200  
Miami, FL 33131

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

**NEW** Registered Agent: \_\_\_\_\_

**NEW** Registered Office Address: \_\_\_\_\_

(**MUST BE FLORIDA STREET ADDRESS**)

200 S. Biscayne Blvd.

Suite 2790

Miami, FL 33131

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 of a member or authorized representative of a member

Raquel A. Rodriguez

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 608, F.S. On 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

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

FILED  
11 APR 26 AM 10:08  
TALLAHASSEE, FLORIDA  
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