

MO9000002357

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

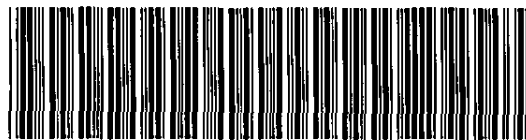
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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13 NOV 20 AM 9:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DEPARTMENT OF STATE

13 NOV 20 AM 10:47

T. BUNCH NOV 21 2013

P



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 891571 4983A

AUTHORIZATION :

COST LIMIT : \$25.00

ORDER DATE : November 19, 2013

ORDER TIME : 9:03 AM

ORDER NO. : 891571-005

CUSTOMER NO: 4983A

CHANGE OF AGENT

NAME: 2060 BISCAYNE BOULEVARD LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Susie Knight

EXAMINER'S INITIALS: _____

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: 2060 BISCAYNE BOULEVARD LLC

2. (a) Principal office address of limited liability company: 2060 Biscayne Boulevard

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

2nd Floor
Miami, Florida 33137

(b) Mailing address of limited liability company:

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

2060 Biscayne Boulevard
2nd Floor
Miami, Florida 33137

06/19/2009

3. Date of filing/registration in Florida

M09000002357

4. Document number

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

Registered Agent:

Norman Braman

Registered Office Address:

2060 Biscayne Boulevard
2nd Floor
Miami, Florida 33137

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

NEW Registered Agent:

Corporation Service Company

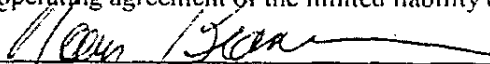
NEW Registered Office Address:

(**MUST BE FLORIDA STREET ADDRESS**)

1201 Hays Street

Tallahassee FL 32301

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

Norman Braman

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. 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.

By: 

Signature of Registered Agent

Corporation Service Company

Sue G. Knight

Assistant Vice President

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

FILING FEE: \$25.00