

M10 0000001862

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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

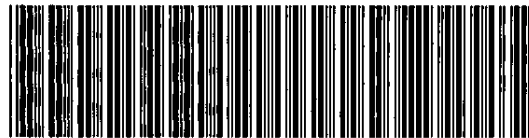
Special Instructions to Filing Officer:

Office Use Only

**G. MCLEOD**

OCT - 6 2010

**EXAMINER**



000185252040

10/05/10--01020--004 \*\*25.00

**FILED**  
10 OCT - 5 PM 1:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## LETTER OF TRANSMITTAL



**Pavilion**

5605 Carnegie Blvd.  
Suite 110  
Charlotte, NC 28209  
Tel: (704) 557-9267  
Fax (704) 552-1159

TO: Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Drive  
Tallahassee, FL 32301

Date: Friday, October 01, 2010  
From: Mollie J. Brown  
Re: Change of Registered Agent in FL

DATED	COPIES	DESCRIPTION
	1	Reg. Agent Change for Pavilion TK-Beach Blvd, LLC
	1	Reg. Agent Change for Pavilion TK-Narcoossee, LLC
	1	Reg. Agent Change for Pavilion TK-Sand Lake, LLC
	1	Reg. Agent Change for Pavilion Boca, LLC

THESE ARE TRANSMITTED AS CHECKED BELOW:

- |  |   |
|--|---|
| <input type="checkbox"/> FOR APPROVAL                            | <input type="checkbox"/> FOR YOUR INFORMATION     |
| <input type="checkbox"/> AS REQUESTED                            | <input type="checkbox"/> APPROVED AS SUBMITTED    |
| <input type="checkbox"/> RESUBMIT                                | <input type="checkbox"/> RETURNED FOR CORRECTIONS |
| <input checked="" type="checkbox"/> SUBMIT                       | <input type="checkbox"/> FOR REVIEW AND COMMENT   |
| <input type="checkbox"/> RETURN COPIES FOR ADDITIONAL SIGNATURES |   |

• REMARKS •

Please return a stamp filed copy. Thank you

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Pavilion TK-Beach Blvd, 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:

Mollie J. Brown

Name of Person

Pavilion Development Company

Firm/Company

5605 Carnegie Boulevard, Suite 110

Address

Charlotte, NC 28209

City/State and Zip Code

mollie.brown@paviliondevelopment.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mollie J. Brown

Name of Person

at ( 704 )

557-9267 Ext. 119

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

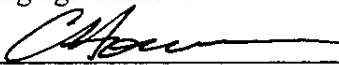
**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY**

*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: Pavilion TK-Beach Blvd, LLC
2. (a) Principal office address of limited liability company: 5605 Carnegie Blvd. Ste 110  
☒ (Note: **MUST BE STREET ADDRESS**) Charlotte, NC 28209
- (b) Mailing address of limited liability company: 5605 Carnegie Boulevard, Suite 110  
☒ (Note: **MAY BE POST OFFICE BOX**) Charlotte, NC 28209
- 4/26/2010 M10000001862
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: National Corporate Research Ltd., Inc
- Registered Office Address: 515 East Park Avenue  
Tallahassee, FL 32301
- (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**
- NEW** Registered Agent: Todd Carr
- NEW** Registered Office Address: 2929 Alamo Drive  
**(MUST BE FLORIDA STREET ADDRESS)** Orlando


FILED  
10 OCT -5 PM 1:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

Cynthia K. Howe, Vice President  
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