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N. Guilligan SEP 1 7 2013

COVER LETTER

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TO: Registration Section Division of Corporations			
SUBJECT: Plantation MOB Name of Lin	Ounces LLC mited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Off	fice Change and fee(s) are submitted for filing		
	•		
Please return all correspondence concerning th	ns matter to the following:		
Bryan D. Sina Name of Person	· .		
Sma Family Holdings LLC	<u>-</u>		
1935 Commerce Lane, =	#3		
Jupiter, FC 33458 City/State and Zip Code)		
Bryan esta familyholdings.com E-mail address: (to be used for future annual report notification)			
For further information concerning this matter	, please call:		
Bryan Sma	at (561) 741-4887		
Name of Person	Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section		
Division of Corporations	Division of Corporations		
Clifton Building	P.O. Box 6327		
2661 Executive Center Circle Tallahassee, Florida 32301	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: Plantation Mois aunus LLC 2. (a) Principal office address of limited liability company: 1935 Commune Lang #3 (Note: MUST BE STREET ADDRESS) (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 3. Date of filing/registration in Florida 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: Registered Office Address: (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**: **NEW** Registered Agent: 1935 Commerce Lane, #3 **NEW** Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) Juster, FC 33458 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 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 configuration that the limited liability company has been notified in writing of this change.

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

Signature of Registered Agent