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JUL 2 3 2014 T. HAMPTON

COVER LETTER

TO: Registration Section Division of Corporations

SF Palm Beach LLC SUBJECT:

Name of Limited Liability Company

Dear Sir or Madam:

r

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Abraham Shaulson

Name of Person

SF Palm Beach LLC

Firm/Company

10800 Biscayne Boulevard, Suite 600

Address

Miami, FL 33161

City/State and Zip Code

exec.asst@millennium-mgt.com

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

For further information concerning this matter, please call:

Abraham Shaulson	305 864-9191
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	g amount:
☑ \$25 Filing Fee	\$55 Filing Fee & Certified Copy

INHS18 (2/14)

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

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Pursuant to the provisions of sections 605.0114 or 605.0116, 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. Na	ame of the limited liability company: SF Palm Beach	n LL(C	
	Principal office address of limited liability company:			Mailing address of limited liability company:
	Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	10800 Biscayne Blud, Suite 60	x	PO Box	x 546752
	Mianu, FL 33161	-	Surfside	e, FL 33154
	10/15/12		M12000	005741
3.	Date of filing/registration in Florida	4.		Document number
5.(a)	CORPORATION SERVICE COMPANY			
5.(<i>a)</i>	Registered Agent and Registered Office shown on the records of the	Florid	a Dept, of Sta	_ e:
	1201 HAYS STREET			
	Registered Office Address (MUST BE FLORIDA STREET AD	DRES	<u>S)</u>	TALLA
	TALLAHASSEE, FL_3	2301		JUL 22
(1-)	CT CORPORATION 5451cm			PH 1: 48 SEE FLORIDA
(b)	Enter name of NEW Registered Agent and/or NEW Registered Of	ffice ac	ldress:	FLORD FLORD
	1200 S PINE ISLAND RD			ALLE 8
	NEW Registered Office Address:			-
	SUITE 250			-
	PLANTATION	3324		
				-
the char agent w was/we the artic	imited liability company is not organized under the laws ngc or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liabi- are authorized by an affirmative we of the members of the cles of organization or the florenting agreement of the line	e regi lity co he lin nited	stered offic ompany, it i nited liabilit liability con	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in npany.
Ŷ	ure of a member or authorized representative of a member			
provisio he obli o mere totifiea	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pe- igations of my position as registered agent as provided fo by reflect a change in the registered office address, I her lin writing of this change.	rform or in (eby c	t in this cap ance of my Chapter 603 NUMEZ Secret	auties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
Buranni				
	Division of Corporations• P.O. Boy FILING FEE			see, FL 32314

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