Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H15000265225 3))) -



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA00000023 Phone

Fax Number

: (850)205~8842 : (850)878~5368

**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 NWS TRANQUILITY BAY PROPERTY OWNER LLC

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Corporate Filing Menu

https://efile.sunbiz.org/scripts/efilcovr.exe

11/5/2015

COVER LETTER

TO: Registration Section Division of Corporations							
NWS Tranquility Bay Property Owner LL	С						
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:							
Kara Dizmang							
Name of Person							
Northwood Investors							
Firm/Company							
1819 Wazee, 2nd Floor							
Address							
Denver, CO 80202							
City/State and Zip Code							
kdizmang@northwoodinvestors.com							
E-mail address: (to be used for future annual re	port notification)						
For further information concerning this matter, pleas	e call:						
Kara Dizmang	303 293-7154						
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						
INHS18 (2/14)							



November 5, 2015

FLORIDA DEPARTMENT OF STATE

NWS TRANQUILITY BAY PROPERTY OWNER LLC 575 FIFTH AVENUE, 23RD FLOOR NORTHWOOD INVESTORS, LLC NEW YORK, NY 10017

SUBJECT: NWS TRANQUILITY BAY PROPERTY OWNER LLC

REF: M12000006431

We have received your electronically transmitted document. However, the document was submitted under the wrong electronic filing type and cannot be processed by this office.

To proceed, you must abandon this filing and resubmit your filing under the appropriate electronic filing type.

Please accept our apology for failing to mention this in our previous letter

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II FAX Aud. #: H15000262653 (Letter Number: 815A00023402)

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P.O BOX 6327 - Tallahassee, Florida 32314

11/5/2015 1:58:49 PM From: To: 8506176383(4/4)

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

Pursuant to the provisions of sections 605.011.4 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	me of the limited liability company: NWS Tranquility	Bay Prop	erty Owner LL	.C	
2. (a)	c/ó Northwood Investors	(b	(b) Co Northwood Investors		
·	•	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			illing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		1819 Wazee, 2nd Floor		1819 Wazee,	2nd Floor	
		Denver, CO 80202	_	Denver, CO	80202	
					M1200000431	
3.		Date of filing/registration in Florida	4.	Ω	ocument number	
5. (۵١	November 19, 2012	•			
<i>J.</i> (<i>a)</i>	Registered Agent and Registered Office shown on the records of the Corporation Service Company Registered Office Address (MUST BE FLORIDA STREET A				
		1201 Hays Street		•	_	
			32301-25	525	ANT.	
		C T Corporation System			と音を	
(t) .	Enter name of NGW Registered Agent and/or NEW Registered Office address:		tress:	Sec. 3.	
					ing a	
		NEW Registered Office Address:	· · · · · · · · · · · · · · · · · · ·		9. 3 0.21	
		1200 South Pine Island Road			3 3	
		Plantation , FL	33324			
the c agent was/1	hai Lw	mited liability company is not organized under the law- nge or changes are made, the Florida street address of t ill be identical. Or, in the case of a Florida limited lial re authorized by amaffirmative vote of the members of cles of organization or the operating agreement of the li	he regis oility co the lim imited li	tered office a mpany, it is h ited liability o	nd the business office of the registered ereby confirmed that the change(s) company or as otherwise provided in any.	
		ire of a member or authorized representative of a member			rinted or typed name of signee	
I hei provi the o to me polifi CT C	eb sic bli rei ed Con	y accept the appointment as registered agent and agrees of all statutes relative to the proper and complete programs of my position as registered agent as provided by reflect a change in the registered office address. I he in writing of this change, position System	e to act erforme for in C ereby co	in this capaci ince of my du hapter 605, I infirm that the	ity. I further agree to comply with the ties, and I am familiar with and accept F.S. Or, if this document is being filed a limited liability company has been	
~		of Registered Agent	: • • .			

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