1130000119

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					
		1			

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STEVEN C. HARTSELL

Partner Direct dial: (239) 336-6244

Email: SteveHartsell@paveselaw.com

1833 Hendry Street, Fort Myers, Florida 33901 | P.O. Drawer 1507, Fort Myers, Florida 33902-1507 | (239) 334-2195 | Fax (239) 332-2243

January 22, 2018

Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

Re: Registered Agent Change

To Whom It May Concern:

Enclosed please find the necessary documentation and filing fee to change the registered agent for 1300 13th Street LLC from Steven C. Hartsell to PLF Registered Agent, LLC.

If you have any questions, please do not hesitate to contact me.

Very Iruly fours.

Steven C. Hartsell

SCH/sbm

Enclosure(s) as indicated ee: 1300 13th Street LLC

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJE	1300 13th Street LLC	
	Name of Limited L	Liability Company
Dear Si	or Madam:	
The end	losed Registered Agent/Registered Office Change and	d fee(s) are submitted for filing.
Please r	eturn all correspondence concerning this matter to the	e following:
Craig	M. Johnson	
	Name of Person	
1300	13th Street LLC	
	Firm/Company	AND
10000	Memorial Drive, Suite 330	
	Address	
Houst	on, TX 77024	
	City/State and Zip Code	
<u></u>	ulie.nichoka johnsonst.	net
E-	mail address: (to be used for future annual report noti	fication)
For furt	her information concerning this matter, please call:	
	Name of Person at (83 &	Area Code & Daytime Telephone Number
	• •	IAILING ADDRESS: egistration Section
	Division of Corporations D	ivision of Corporations
	<u>-</u>	O. Box 6327 allahassee. Florida 32314
	Enclosed is a check for the following amount:	
	☑ \$25 Filing Fee ☐ S	S55 Filing Fee & Certified Copy
INHS18	(2/14)	

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

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. Name of the limited liability company:

1300 13th Street LLC

1. Na	ame of the limited liability company: 1300-13th Str	eel LLC		
2. (a)	10000 Memorial Drive, Suite 330	(b) _		
(u) .	Principal office address of limited liability company:	(")	Mailing address of limited liability company:	
	(Note: MUST BE STREET ADDRESS)		(<u>Note: MAY BE POST OFFICE BOX</u>)	
	Houston, TX 77024			
	03/22/2013	M	 3000001834	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	Steven C. Hartsell			
	Registered Agent and Registered Office shown on the records of the 1833 Hendry Street	he Florida De	pt. of State:	
	Registered Office Address (MUST BE FLORIDA STREET A	(DDRESS)		
	Fort Myers, FL	33901	18 SIVE	
(b)	PLF Registered Agent L.L.C.		JAN JAN	
	Enter name of NEW Registered Agent and/or NEW Registered	Office addres	1 3 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
	Same as 5(a) above.		AM 9:	
	NEW Registered Office Address:		AM 9: 23	
	, FL.			
the cha agent v was/w	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the register bility comp f the limited	ed office and the business office of the registered any, it is hereby confirmed that the change(s) I liability company or as otherwise provided in	
		Craig	M. Johnson	
Signa	sture of a member or authorized representative of a member		Printed or typed name of signee	
provisi the obi to mer	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, I had no writing of this change.	ee to act in performand I for in Cha wereby conf	this capacity. I further agree to comply with the e of my duties, and I am familiar with and accept pter 605, F.S. Or, if this document is being filed rm that the limited liability company has been	
Signatu	ire of Registered Agent			

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