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To:

Division of Corporations

Fax Number

Fax Number

: (850)617-6383

: (702)866-2689

From:

Account Name : INCORP SERVICES INC

Account Number : I20120000007 Phone : (702)866-2500

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

CEmail Address

documents@incorp.com

LLC REGISTERED AGENT CHANGE 36 EAST 23RD ST. ASSOCIATES, LLC

Certificate of Status	0
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Page Count	02
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J. HARRIS

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Corporate Filing Menu

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COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJI	36 East 23rd St. Associates, LLC					
Name of Limited Liability Company						
Dear S	ir or Mudam:					
The en	closed Registered Agent/Registered Office	Change and fe	e(s) are submitted for filing.			
Please	return all correspondence concerning this	matter to the fo	llowing:			
Jayci	e Howard					
	Name of Person		•			
InCo	p Services, Inc.					
	Firm/Company		•			
3773	Howard Hughes Parkway Suite 500	os				
	Address		•			
Las V	/egas, NV 89169-6014					
	City/State and Zip Code		•			
	ments@incorp.com					
ŀ	-mail address: (to be used for future annua	l report notifica	ation)			
For fu	rther information concerning this matter, pl	lease call:				
Jayci	e Howard for InCorp Services, Inc.	at (246-2677			
	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	Regi: Divis P.O.	LING ADDRESS: stration Section sion of Corporations Box 63*** hassec, Florida 32314			
	Enclosed is a check for the following amount:					
	☑ \$25 Filing Fee	35 5	Filing Fee & Certified Copy			
INHSI	8 (2/14)					

STATEMENT OF CHANGE OF REGISTERED OFFICE OR 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.

I. No	ame of the limited liability company: 36 East 23	3rd St. As	sociates, l	LC	
2. (a)	2637 E. ATLANTIC BLVD.		b) 2637 E.	ATLANTIC BLVD.	
£. (B)	Principal office address of limited liability company:		1 -17	Mailing address of limited liability company:	
	(Note: MUST BE STREET ADDRESS) PMB #141		PMB #1	(<u>Note: MAY BE POST OFFICE BOX</u>) A1	
					
	POMPANO BEACH, FL 33062		POMPA	NO BEACH, FL 33062	
	06/27/2013		M130000	004118	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	CONE MANAGEMENT, INC.				
J. (-)	Registered Agent and Registered Office shown on the records	of the Flori	la Dept. of State	- : :	
	2637 E. ATLANTIC BLVD.			_	
Registered Office Address (MUST BE FLORIDA STREET ADDRESS) PMB #141					
	POMPANO BEACH	FL_3306	52	22 A	
(b)	inCorp Services, Inc.		AUG 22		
	Enter name of NEW Registered Agent and/or NEW Registe	erad Office a	ddress:	plus and a second	
	17888 67th Court North		127		
	NEW Registered Office Address:		·-·	. <u></u>	
				- II-	
	Loxahatchee	FL_334	70	_	
the changent was/was/was/was/was/was/was/was/was/was/	imited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the membericles of organization of the operating agreement of the operating agreement of the proper of authorized representative of a member by accept the appointment as registered agent and it is a change in the registered agent as provely reflect a change in the registered office address	s of the reg d liability ors of the li the limited	istered office company, it is nited liabilit liability con	c and the business office of the registered is hereby confirmed that the change(s) y company or as otherwise provided in apany. Daniel Wiener Printed or typed name of signee	
notifie	ely reflect a change in the registered agent as provely reflect a change in the registered office address d in writing of this change. Jaycie Howard on line of Registered Agent				
Division of Corporations P.O. Box 6327 Tallabassee, FL 32314 FILING FEE: \$25.00					

INHS18 (2/14)