Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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R. WHITE

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Electronic Filing Menu

Corporate Filing Menu

Help

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.

1.	Na	me of the limited liability company:	8701 COLLIN	IS O	EVELOPM	ENT, LLC		_
2. ((a)	2665 South Bayshore Drive, S	Sulte 1020		(b) P.O. E	30x 330609		•
-	(-)	Principal office address of limited in (Note: MUST RESTREET)			(0)	Mailing address of limited lis (Note: MAY BE POST O	, , ,	•
		Coconut Grove, FL 33133	··	_	Mlami	, FL 33233	n digeneral di	
		-		_	, 		·	
		12/11/2013			M13000	0007845		
3.		Date of filing/registration is	n Florida	4.		Document number		•
5.	(a)	Pearl, Brian				_		
	`	Registered Agent and Registered Office sho		the Flo	rida Dept. of S	tale:		
		2665 South Bayshore Drive, Suite 1020			·			
		Registered Office Address (MUST BR FLORIDA STREET ADDRESS)			1 21			
						_	Sahad II (SA)	
		Coconul Grove	.FL	331	33		N S	-19
	/L\	NRAI Services, Inc.				_	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
'	(Ь)	Enter name of NEW Rephiered Agent and	for NEW Registered	Office	gddress:	_		į 11
		1200 South Pine Island Road	1					
		NEW Registered Office Address:					38	
								,
		Diantalias		202	0.4			
		Plantation	, PL	333	24			
the age was	cha nt v s/ve arti	mited liability company is not organing or changes are made, the Florids ill be identical. Or, in the case of a re authorized by an affirmative vote cles of organization or the operating	street address of Florida limited li of the members of agreement of the	the reality of the limite	egistered off y company, i limited liabi ed liebility c	ice and the business office t is horoby confirmed that lity company or as otherw	e of the registered the change(s) vise provided in	1
-6	that	ure of a member or authorized representative	of a member	_		Printed or typed name of si	gnee	
7	$\eta{\mathcal{U}}$	ny accept the appointment as register ons of all statules relative to the pro- gations of my position as registered by reflect a change in the registered by whiting of this change.	red agent and ogreer and complete agent as provide office address, I	ree to perfor d for hereb	act in this co rmonce of m in Chapter o y confirm the	pacity. I further agree to w duties, and I am familia 05, F.S. Or, if this doow at the limited liability con	o comply with the ar with and accept nent is heing filed apany has been	•