M14000003/63

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

Office Use Only



100300336991

08/16/17--01019--023 **25.00



D SCOTT JUN 2 0 2017

COVER LETTER

TO: Registration Section Division of Corporations					
HH GULFSTREAM LAND H	HOLDINGS, LLC				
Name of Limited Liability Company					
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Of	ffice Change and fee(s) are submitted for filing.				
Please return all correspondence concerning the	his matter to the following:				
ERIC RAYMAN					
Name of Person					
ERIC RAYMAN, P.A.					
Firm/Company					
615 NORTHEAST 3RD AVENUE					
Address					
FORT LAUDERDALE, FLORIDA 3330	04				
City/State and Zip Code					
Eric@LawHelpFlorida.com		·			
E-mail address: (to be used for future an	inual report notification)				
For further information concerning this matter	r, please call:	7. 70 1			
Eric Rayman	954 336-5550	Number 8			
Name of Person	Area Code & Daytime Telephone	2 Number 💢			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clitton 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	S55 Filing Fee & Certified Copy				
INHS18 (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.

l. Na	ime of the limited liability company: HH GULFST	REAM LAND HO	<u> </u>		
?. (a)	3299 Northwest 2nd Avenue	(b) 3299 N	(b) 3299 Northwest 2nd Avenue		
. (-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	· · · · · · · · · · · · · · · · · · ·	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	Boca Raton, Florida 33444	Boca R	Boca Raton, Florida 33444		
	May 8, 2014	M14000	003163		
	Date of filing/registration in Florida	4.	Document number		
. (a)	Andrew Greenbaum				
. ()	Registered Agent and Registered Office shown on the records of 20 South Swinton Avenue	the Florida Dept. of Sta	ete:		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	_		
	Delray Beach, FI	33444	_		
(b)	William Milmoe				
	Enter name of NEW Registered Agent and/or NEW Registered Office address:				
	3299 Northwest 2nd Avenue				
	NEW Registered Office Address:		~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~		
			- · · · · · · · · · · · · · · · · · · ·		
	Boca Raton	33431	o − − − − − − − − − − − − − − − − − − −		
ne cha gent v ras/we ne arti	imited liability company is not organized under the la inge or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members cles of organization or the operating agreement of the ture of a member or authorized representative of a member	ws of the State of F f the registered offic iability company, it of the limited liabili	ce and the business office of the registere is hereby confirmed that the change(s) ity company or as otherwise provided in mpany.		
herei rovisi he obl	by accept the appointment as registered agent and ag ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address, I I if writing of this change.	ree to act in this cap e performance of my ed for in Chapter 66 hereby confirm that	pacity. I further agree to comply with the duties, and I am familiar with and accepts, F.S. Or, if this document is being filed the limited liability company has been		
ignatu	re of Registered Agent				

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