

MIN 000005240

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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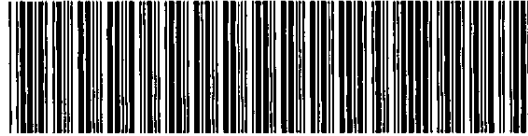
(Business Entity Name)

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JUL 22 2014

C. CARROTHERS

2015 JUL 20 AM 10:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 7, 2015

MICHAEL J KORST  
2720 CATON FARM ROAD  
JOLIET, IL 60435

Ref. Number: M1400005240

We have received your document for and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The attached form must be completed in order to file the document.

THE FORM YOU SUBMITTED IS FOR A PROFIT CORPORATION.

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) 245-6050.

Cathy A Carrothers  
Regulatory Specialist

Letter Number: 315A00014111

**MICHAEL J. KORST, P.C.**

*Attorney at Law*  
2720 CATON FARM ROAD  
JOLIET, ILLINOIS 60435

TELEPHONE 815.609.8080  
FAX 815.609.8071

OUR FILE NO.

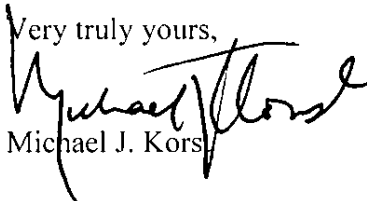
July 14, 2015

Ms. Cathy A. Carrothers  
Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**RE: PMG 56, LLC, FL Series**  
**Referenced No.: M1400005240**

Dear Ms. Carrothers:

Enclosed please find a copy of your letter dated July 7, 2015, the Cover Letter and Statement of Change of Registered Office. Please issue a refund and send it to me in the enclosed self-addressed stamped envelope in the amount of \$10.00 as the check that was sent in originally in the amount of \$35.00 is greater than the actual filing fee of \$25.00 for the Change of Registered Agent for a Limited Liability Company. If you have any questions, please do not hesitate to contact me.

Very truly yours,  
  
Michael J. Korst

MJK/ld  
Enclosures

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: PMa 56, LLC, FL Series  
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:

Michael Korst

Name of Person

Michael J. Korst, P.C.

Firm/Company

2720 Caton Farm Road

Address

Joliet, IL 60435

City/State and Zip Code

mkorst@korstlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Korst

Name of Person

at ( 815 )

609.8080

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

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. Name of the limited liability company: PMG 56, LLC, FL series

2. (a) 1590 S. M. Lwaukee Ave. (b) \_\_\_\_\_

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

1590 S. M. Lwaukee Ave, Suite 224  
Libertyville, IL 60448

3. July 23, 2014  
Date of filing/registration in Florida

4. M14000005240  
Document number

5. (a) \_\_\_\_\_  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

NRAI Services, Inc.

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1700 South Pine Island Road  
Plantation, FL 33324

(b) \_\_\_\_\_  
Enter name of NEW Registered Agent and/or NEW Registered Office address:

Sean Cahill

NEW Registered Office Address:

8503 Sandy Beach Street  
Tampa, FL 33634

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent