

MI 6000002145

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

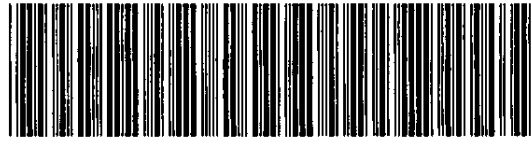
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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05/07/18--01010--004 \*\*25.00

FILED  
18 MAY -7 PM 12:27  
SECRETARY OF STATE  
TOLANDS WEB SERVICES

TO: PHYSICAL: Dept. of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

MAILING: Dept. of State  
Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, FL 32314

FROM: National Corporate Headquarters, Inc.  
5605 Riggins Court Suite 200  
Reno NV 89502  
(800) 638-2320  
(775) 329-0852

DATE: Thursday, April 19, 2018

*SENT VIA USPS*

To Whom It May Concern:

Attached, please find the following document(s):

- Change of Registered Agent

For **PRESTIGE PROPERTIES 3838, LLC**

We have included payment in the amount of \$25.00 for the following fees:

- Change of Registered Agent

We have included one original and one copy of the Articles.

If there are any questions, please call 800-542-2077

**Please return the file stamped copy of the Articles to the address below:**

Renewal Department  
5605 Riggins Court Suite 200  
Reno NV 89502  
Attn: Judi Anguiano

**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: PRESTIGE PROPERTIES 3838, LLC

2. (a) 2927 SW 26th Terrace (b) (Same)  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

Cape Coral, FL 33914

3. 03/14/2016 4. M16000002145  
Date of filing/registration in Florida Document number

5. (a) BUSINESS FILINGS INCORPORATED  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

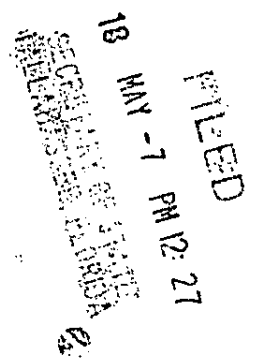
1200 SOUTH PINE ISLAND ROAD  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

PLANTATION, FL 33324

(b) Registered Agents Inc.  
Enter name of NEW Registered Agent and/or NEW Registered Office address:

3030 N. Rocky Point Dr.  
NEW Registered Office Address:  
STE 150A

Tampa, FL 33607



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]  
Signature of a member or authorized representative of a member

Jack Christensen  
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.

Bill Havre Bill Havre - Assistant Secretary  
Signature of Registered Agent

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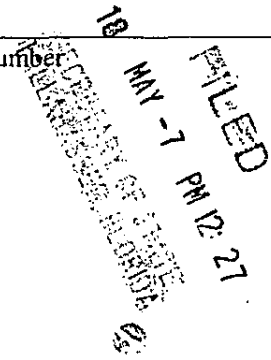
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Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*  
PLANTATION, FL, FL 33324



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Enter name of NEW Registered Agent and/or NEW Registered Office address:  
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NEW Registered Office Address:  
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[Signature]  
Signature of a member or authorized representative of a member

Jack Christensen  
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Bill Havre Bill Havre - Assistant Secretary  
Signature of Registered Agent