

Division of Corporations

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M1600009309

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : UNITED AGENT GROUP INC.
Account Number : 110432003053
Phone : (561)508-5033
Fax Number : (561)694-1639

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

Email Address: _____

**LLC REGISTERED AGENT CHANGE
US REGENCY WILLA SPRINGS, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

MAR 05 2018

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MAR 06 2018
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: US Regency Willa Springs, LLC

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:

Jon-Michael Sanchez

Name of Person

United Agent Group

Firm/Company

11380 Prosperity Farms Road #221E

Address

Palm Beach Gardens, FL 33410

City/State and Zip Code

govdocs@unitedagentgroup.com

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

For further information concerning this matter, please call:

Jon-Michael Sanchez

561

508-5033

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

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: US Regency Willa Springs, LLC
2. (a) ONE INDEPENDENT DR, STE. 114
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
JACKSONVILLE, FL 32202
- (b) ONE INDEPENDENT DR, STE. 114
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
JACKSONVILLE, FL 32202
3. 11/18/2016
Date of filing/registration in Florida
4. M16000009309
Document number
5. (a) F&L CORP.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
ONE INDEPENDENT DR SUITE 1300
Registered Office Address (Note: MUST BE FLORIDA STREET ADDRESS)
JACKSONVILLE, FL 32202
- (b) United Agent Group Inc.
Enter name of NEW Registered Agent and/or NEW Registered Office address:
11380 Prosperity Farms Road #221E
NEW Registered Office Address:
Palm Beach Gardens, FL 33410

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

Jon-Michael Sanchez, Attorney-in-Fact

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.

Jon-Michael Sanchez, Special Secretary

Signature of Registered Agent

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

FILED
2018 MAR -5 AM 8:52
TALLAHASSEE, FLORIDA