

(Re	equestor's Name)
(Ad	ddress)
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(Ci	ity/State/Zip/Phone #)
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(De	ocument Number)
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COVER LETTER

TO:

Registration Section

Divi	sion of Corporations			
SUBJECT:	Villas of Oakdale Apartmen	ts Florida LLC	,	
SUBJECT:	Nar	ne of Limited Li	ability Company	
Dear Sir or M	Madam:			
The enclosed	d Registered Agent/Registered Off	fice Change and	fee(s) are submitted for filing	
Please return	all correspondence concerning th	nis matter to the f	ollowing:	
Allan Rotle	ewicz			
	Name of Person		_	
Anchor Ins	surance Holdings			
	Firm/Company		_	
5959 Cent	tral Avenue, Suite 200			
	Address			
St. Peters	burg, FL 33710			
	City/State and Zip Code		_	
arotlewicz	@relyonanchor.com			
E-mail	address: (to be used for future and	nual report notifi	ca tion)	
For further in	nformation concerning this matter	, please call:		
Allan Rotle	ewicz	727 at (853-6723	
	Name of Person	\	Area Code & Daytime Telep	phone Numbe
Regi Divi Clift 2661	stration Section sion of Corporations on Building Executive Center Circle nhassee, Florida 32301	Reg Div P.O	ALING ADDRESS: distration Section ision of Corporations . Box 6327 lahassee, Florida 32314	RECEIVE
Encl	osed is a check for the following	; amount:		SEP 1 8 2019
2 1 \$:	25 Filing Fee	□ \$5.	5 Filing Fee & Certified Copy	<i>;</i>
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

. Na	me of the limited liability company: Villas of C	akuale A	Apartments Florida LLC
. (a)	5959 Central Avenue	((b) 5959 Central Avenue
, ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability compan (Note: MAY BE POST OFFICE BOX)
	Suite 200		Suite 200
	St. Petersburg, FL 33710		St. Petersburg, FL 33710
	04/13/2017		M17000003201
	Date of filing/registration in Florida	4.	Document number
(a)	Michael Terry		
	Registered Agent and Registered Office shown on the record 5959 Central Avenue	s of the Flori	rida Dept. of State:
	3333 Ceridal Averide		
	Registered Office Address	ET ADDRES	<u>ESS)</u>
	Registered Office Address (MUST BE FLORIDA STRE	ET ADDRES FL_33710	10
(b)	Registered Office Address Suite 200	3371	10
(b)	Registered Office Address Suite 200 St. Petersburg	. FL 33710	10 SEP 20 F
(b)	Registered Office Address Suite 200 St. Petersburg Allan Rotlewicz	. FL 33710	10 SEP 20 F
(b)	Registered Office Address (MUST BE FLORIDA STREE Suite 200 St. Petersburg Allan Rotlewicz Enter name of NEW Registered Agent and/or NEW Regist	. FL 33710	10 SEP 20 FH
(b)	Registered Office Address (MUST BE FLORIDA STREE Suite 200 St. Petersburg Allan Rotlewicz Enter name of NEW Registered Agent and/or NEW Regist 5959 Central Avenue	. FL 33710	10 SEP 20 PH 3:

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



Allan J. Rotlewicz*
General Counsel
5959 Central Avenue, Suite 200
Saint Petersburg, Florida 33710

D: 727.853.6723 F: 727.914.7252

E: arotlewicz@relyonanchor.com www.RelyOnAnchor.com * Admitted in FL, NY & NJ

September 16, 2019

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Statement of Change of Registered Agent Forms

Dear Sir or Madam,

Enclosed kindly find two statement of change of registered agent forms along with two checks for filing fees for Villas of Oakdale Apartments Florida, LLC and Mainbrook of Hernando Florida, LLC.

If you have any additional questions, do not hesitate to contact me.

Respectfully,

Allan J. Rotlewicz, Esq.