## M1700000 5125

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## COVER LETTER . . .

TO:	Registration Section Division of Corporations						
SUBJ	RESERVE AT LAKE BUCHANAN 151, LLC						
00111		Limited Li	ability Company				
Dear S	Sir or Madam:						
The er	nclosed Registered Agent/Registered Office Ch	nange and	fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to the following:							
GEO	RGE ULLRICH						
	Name of Person						
CRE	ATIVE REALTY PARTNERS						
	Firm/Company		<del></del>				
9465	WILSHIRE BLVD., THIRD FLOOR						
	Address		water-				
BEVE	ERLY HILLS CA 90212						
	City/State and Zip Code						
GEO	RGE@CREATIVEREALTYPARTNERS	S.COM					
ŀ	E-mail address: (to be used for future annual re	port notifi	cation)				
For fu	rther information concerning this matter, pleas	e call:					
GEO	RGE ULLRICH	714	267-6132				
	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		Reg Div P.C	AILING ADDRESS: gistration Section rision of Corporations D. Box 6327 lahassee, Florida 32314				
	Enclosed is a check for the following amou	unt:					
	☑ \$25 Filing Fee	<b>□</b> \$5	5 Filing Fee & Certified Copy				
INHSI	8 (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.

ι.	Na	me of the limited liability company:	LAK	E BUCHA	NAN 151, LLC
2.		RESERVE AT LAKE BUCHANAN 151 C/O CF	F	(b) RESER	VE AT LAKE BUCHANAN 151 C/C
<b></b> -	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
		9465 WILSHIRE BLVD., THIRD FLOOR		9465 W	ILSHIRE BLVD., THIRD FLOOR
		BEVERLY HILLS CA 90212	_	BEVERI	LY HILLS CA 90212
		06/15/2017		M170000	005125
<ul><li>3.</li><li>5.</li></ul>	(2)	Date of filing/registration in Florida MOSES, MICHAEL	4.		Document number
J.	(a)	Registered Agent and Registered Office shown on the records of th	e Flori	da Dept. of Stat	_ e:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 12443 SAN JOSE BLVD., SUITE #604				2019
		JACKSONVILLE ,FL3	3222	3	ZIJ9 OCT 30
(b)	(b)	RON WENZEL			
	• •	Enter name of NEW Registered Agent and/or NEW Registered C	office 2	ddress:	PR 21
		GRAIL MANAGEMENT GROUP			TATE DRIDA
		NEW Registered Office Address:			-
		676 CHERRY STREET, SUITE #2			_
		WINTER PARK, FL3	32789	9	<u>.</u>
the age was the	cha nt w s/we arti	mited liability company is not organized under the lawsing or changes are made, the Florida street address of till be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liable of a member or authorized representative of a member	he reg pility of the li imited	istered office company, it i mited liabilit	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in npany.
pro the to n	visio obli nere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p gations of my position as registered agent as provided by reflect a change in the registered office address, I he in writing of this change.	e to a verfori for in vrehy	ct in this cap nance of my Chapter 603 confirm that	acity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
Sig	natut	c of Registered Agent	. w . £ 3.4	17= Tallab	once El 22214

FILING FEE: \$25.00