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## **COVER LETTER**

#### TO: **Registration Section** Division of Corporations

### Granite Associates Management, LLC SUBJECT:

Name of Limited Liability Company

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420

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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:

Donna Colavito

Name of Person

Granite Associates, Inc.

Firm/Company

225 Banyan Boulevard, Suite 130

Address

Naples, FL 34102

City/State and Zip Code

# dcolavito@granitelp.com

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

For further information concerning this matter, please call:

Louis J. Boyd	239 228-6505
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	
Enclosed is a check for the following	amount:
☑ \$25 Filing Fee	\$55 Filing Fee & Certified Copy

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.

1. Na	ame of the limited liability company: Granite A	ssociates Management, LLC
2. (a)	One Cablevision Center, P.O. Box 311	(b) One Cablevision Center, PO Box 311
<b>2</b> . (u)	Principal office address of limited liability company ( <u>Note: MUST BE STREET ADDRESS</u> )	
	Liberty, NY 12754	Liberty, NY 12754
	······································	
	November 20, 2017	M1700009873
3.	Date of filing/registration in Florida	4. Document number
5. (a)	United Corporate Services, Inc.	
J. (a)	Registered Agent and Registered Office shown on the recor	rds of the Florida Dept. of State:
	9200 South Dadeland Blvd	-
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		EEI MUDRESS)
	Suite 508	
	Miami	<b>D</b> 33156
		_, PL
(b)	Granite Associates, Inc.	
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u>	stered Office address:
	225 Banyan Boulevard	
	<u>NEW</u> Registered Office Address:	
	Suite 130	
	Naples	FL_34102
		FL
the cha agent w was/we	ange or changes are made, the Florida street addre will be identical. Or, in the case of a Florida limit	he laws of the State of Florida, it is hereby confirmed that after ess of the registered office and the business office of the registered ted liability company, it is hereby confirmed that the change(s) bers of the limited liability company or as otherwise provided in of the limited liability company.
A	us But	Louis J. Boyd
/ Signa	ture of a niember or authorized representative of a member	Printed or typed name of signee
provisi the oblic to mer	ions of all statutes relative to the proper and com	d agree to act in this capacity. I further agree to comply with the plete performance of my duties, and I am familiar with and accep ovided for in Chapter 605, F.S. Or, if this document is being filed ss, I hereby confirm that the limited liability company has been
Signatu	ire of Registered Agent	_
V	/ Division of Corporations• P	P.O. Box 6327• Tallahassee, FL 32314

FILING FEE: \$25.00

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