(Re	equestor's Name))
(Ad	dress)	
(Ad	dress)	<u> </u>
(Cit	ty/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	es of Status
Special Instructions to	Filing Officer:	
\$35	.00	NKDeu

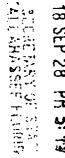
Office Use Only



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COVER LETTER

Division of Corporation	S	
SUBJECT: Fort Lauderdale I		
	Name of Co	orporation
DOCUMENT NUMBER:	P01000099819	
The enclosed Statement of Chan	ge of Registered Office	/Agent and fee are submitted for filing.
Please return all correspondence	concerning this matter	to the following:
<u>Kathy</u>	Moro	
	Name of Con	tact Person
Frank '	Weinberg Black, I Firm/Co	P.L.
	Firm/Co	mpany
7805 S	W 6th Court	
	Addr	ess
Plantat	ion, FL 33324	
	City/State an	d Zip Code
		m KMoro@fwblaw.net sture annual report notification)
For further information concerni	ng this matter, please c	all:
Lynda Watki	ns	_ at <u>(954) 627-9350</u>
Name of Contact	Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made	e payable to the Departi	ment of State.
Amend Divisio P.O. Bo	ment Section of Corporations ox 6327	Street Address: Amendment Section Division of Corporations Clifton Building
Tallaha	issee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

TO: Amendment Section

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

•	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, thi ange is submitted for a corporation organized under the laws of the State of <u>Florida</u>	S	_
in order	er to change its registered office or registered agent, or both, in the State of Florida.		
1. The name of t	the corporation: Fort Lauderdale Investment Partnership II, Inc.		
2. The principal	office address: 301 East Las Olas Boulevard; Fort Lauderdale, FL 33301	<u> </u> .	
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 10/15/2001 Document number: P01000099819		
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)		
	CORPORATION SERVICE COMPANY		
	1201 HAYS STREET	3 8	FILED
6. The name and s (if changed): —	TALLAHASSEE, FLORIDA 32301-2525	SFP 28	
	d street address of the new registered agent (if changed) and /or registered office	8 PH	
	FRANK WEINBERG & BLACK P.L.	نة	
	1875 NW CORPORATE BLVD SUITE 100 C/O STEVEN DEUTSCH, ESQ	43	
	P.O. Box NOT acceptable		
	BOCA RATON, FL 33431		
The street addreas changed will	ess of its registered office and the street address of the business office of its registered be identical.	ager	ıt.
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.		
Sermotor	ire of an officer or director Printed or typed name and title		-
I hereby accept to I further agree to performance of agent. Or, if this	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as register is document is being filed merely to reflect a change in the registered office address. I that the corporation has been notified in writing of this change.	ed:	
_	9/6/2017		
5	nature of Represent Date		-
If signing on bel	chalf of an entity:		
	STEVEN W. DEUTSCH		
Ту	Sped or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

* * * FILING FEE: \$35.00 * * *