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COVER LETTER

Division of Co		
SUBJECT: L.H.T.W		
	Name o	f Corporation
DOCUMENT NUMBER:	V48005	
The enclosed Statemer	nt of Change of Registered Of	fice/Agent and fee are submitted for filing.
Please return all corres	pondence concerning this ma	tter to the following:
	Kathy Moro	Contact Person
	name of	Contact Person
	Frank Weinberg Black	k, P.L. /Company
	7805 SW 6th Court	ddress
	Plantation, FL 33324 City/State	e and Zip Code
E-		s.com KMoro@fwblaw.net or future annual report notification)
For further information	n concerning this matter, pleas	se call:
Lynd	a Watkins	at (954) 627-9350
Name o	of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35,00 c	heck made payable to the Dep	partment of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

CR2E045 (03/12)

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

statement of char	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this age is submitted for a corporation organized under the laws of the State of <u>Florida</u> to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	he corporation: L.H.T.W., Inc.
2. The principal	office address: 301 East Las Olas Boulevard; Fort Lauderdale, FL 33301
3. The mailing ac	ddress (if different):
4. Date of incorp	poration/qualification: 06/30/1992 Document number: 65-0362848
	street address of the current registered agent and registered office on file with the ment of State: (If resigned, enter resigned)
	CORPORATION SERVICE COMPANY
	1201 HAYS STREET
	TALLAHASSEE, FLORIDA 32301-2525
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office
	FRANK WEINBERG & BLACK P.L. 1875 NW CORPORATE BLVD SUITE 100 C/O STEVEN DEUTSCH, ESQ P.O. Box NOT acceptable
	BOCA RATON, FL 33431
The street address changed will	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa	s authorized by resolution duly adopted by its board of directors or by an officer so e board or the corporation has been notified in writing of the change.
I hereby accept to I further agree to performance of to agent. Or, if this	Printed or typed name and title The appointment as registered agent and agree to act in this capacity. The comply with the provisions of all statutes relative to the proper and complete only duties, and I am familiar with and accept the obligation of my position as registered document is being filed merely to reflect a change in the registered office address, I hat the corporation has been notified in writing of this change.
Sign	9/6/2015 Date
If signing on be	STEVEN W. DEUTSCH
Ty	ped or Printed Name

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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

CR2E045 (03/12)