L13000 14841

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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SECRETARY OF STATE

2022 APR -7 AH 8: 49 2022 APR -7 FH 3: 31

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee. FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195				
REFERENCE : 602257 8041492				
AUTHORIZATION Lonelle man				
COST LIMIT : (\$ 25.00				
ORDER DATE : April 7, 2022				
ORDER TIME : 1:27 PM				
ORDER NO. : 602257-010				
CUSTOMER NO: 8041492				
CHANGE OF AGENT				
NAME 14070 DAIN BEACH DOINE LLC				
NAME: 14270 PALM BEACH POINT, LLC				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY XX PLAIN STAMPED COPY				
CONTACT PERSON: Alexxis Weiland EXT#				

EXAMINER:

COVER LETTER

TO: Registration Section

Divi	sion of Corporations			
SUBJECT:	14270 PALM BEACH POINT, LLC			
SUBJECT:	Name of Limited Liability Company			
Dear Sir or N	Madam:			
The enclosed	d Registered Agent/Registered Office Char	ange and fee(s) are submitted for filing.		
Please return	all correspondence concerning this matter	ter to the following:		
	Name of Person	`		
	Firm/Company			
	Address			
	City/State and Zip Code	 		
E-mail	address: (to be used for future annual repo	port notification)		
For further in	nformation concerning this matter, please of	e call:		
	at (′)		
	Name of Person	Area Code & Daytime Telephone Number		
	ling Address:	Street Address:		
	stration Section sion of Corporations	Registration Section Division of Corporations		
P.O.	Box 6327	The Centre of Tallahassee		
Talla	ahassee. FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
Encl	osed is a check for the following amount	nt:		
□ \$2	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,	Name of the limited liability company: 14270 PAL	M BEACH POINT,	LLC
2. (a	a) Principal office address of limited liability compan	(b)	Mailing address of limited liability company:
	(Note: MUST BE STREET ADDRESS)		(Note: MAY BE POST OFFICE BOX)
	08/14/2013	L130	00114841
3.	Date of filing/registration in Florida	4.	Document number
5. (Registered Agent and Registered Office shown on the reco BARBUTO, ANTHONY, ESQ.	rds of the Florida Dept.	of State:
	Registered Office Address (MUST BE FLORIDA STR 12773 W. Forest Hill Blvd., 101	<u>(EET ADDKESS)</u>	
	WELLINGTON	_, FL	
(t	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent </u>	stered Office address:	ZOZZ APR -7 A SECRETARY OF ALLAHASSEE.
	NEW Registered Office Address:		OF STAIR
	1201 Hays Street		
	Tallahassee	_, FL_32301	
chan agen was/	e limited liability company is not organized under the ge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limit were authorized by an affirmative vote of the membarticles of a greement of the operating agreement of	of the registered offited liability companders of the limited ling of the limited ling.	ice and the business office of the registered y, it is hereby confirmed that the change(s) iability company or as otherwise provided in y company.
	gnature of a member or authorized representative of a member		Printed or typed name of signee
prov. the o to me	reby accept the appointment as registered agent and issions of all statutes relative to the proper and compobligations of my position as registered agent as properly reflect a change in the registered office addressed in writing of this change.	d agree to act in thi pleie performance o wided for in Chapte ss, I hereby confirm	s capacity. I further agree to comply with the of my duties, and I am familiar with and accept or 605, F.S. Or, if this document is being filed that the limited liability company has been
Signa	ature of Registered Agent	_	

(Re	questor's Name)		
(AO	dress)		
(Add	diess)		
(City/State/Zip/Phone #)			
(0	, research pri none /	•	
PICK-UP	WAIT	MAIL	
(Bu:	siness Entity Name	e)	
(00)	cument Number)		
(50			
Certified Copies	_ Certificates o	of Status	
Special Instructions to Filing Officer:			
J. HORNE			
APR - 8 2022			





CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195			
REFERENCE : 602257 8041492			
AUTHORIZATION : Spelbele na			
COST LIMIT : \$ 25.00			
ORDER DATE : April 7, 2022			
ORDER TIME : 1:27 PM			
ORDER NO. : 602257-005			
CUSTOMER NO: 8041492			
CHANGE OF AGENT			
NAME: 3899 SHUTTERFLY WAY, LLC			
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:			
CERTIFIED COPY XX PLAIN STAMPED COPY			
CONTACT PERSON: Alexxis Weiland EXT#			

EXAMINER:

COVER LETTER

TO: Registration Section Division of Corporations		
3899 SHUTTERFLY SUBJECT:	Y WAY, LLC	
	Name of Limite	d Liability Company
Dear Sir or Madam:		
The enclosed Registered Agent/R	Registered Office Change	and fee(s) are submitted for filing.
Please return all correspondence	concerning this matter to	he following:
Name of	Person	——————————————————————————————————————
		' ,
Firm/Co	mpany	
Addres	SS	
City/State ar	nd Zip Code	
	•	
E-mail address: (to be used	for future annual report ne	otification)
For further information concerning	ng this matter, please call:	
Name of Person	at ()
Mailing Address:		Street Address:
Registration Section Division of Corporation	ns	Registration Section Division of Corporations
P.O. Box 6327	1	The Centre of Tallahassee
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
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. N	ame of the limited liability company: 3899 SHUTTER	RFLY WAY, LLC		
2. (a)		(b)		
	Principal office address of limited liability company:	(0)	Mailing address of limited liability company:	_
	(<u>Note: Must be street address</u>) 12773 W. Forest Hill BLVD	12773 W.	(<u>Note: MAY BE POST OFFICE BOX</u>) FOREST HILL BLVD	
	101 WELLINGTON, FL 33414	101 WE	ELLINGTON, FL 33414	_
	02/21/2014	L1400002	29901	_
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)				
J. (a)	Registered Agent and Registered Office shown on the records of BARBUTO, ANTHONY, ESQ.	the Florida Dept, of St	tate:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 12773 W. Forest Hill Blvd., 101			
	WELLINGTON, FI	33414	2022 SEC TALL	
			922 APR - 7 SECRETAR ALLAHASS	٠
(b)	Enter name of NEW Registered Agent and/or NEW Registered	1 Office address:	-7 SSE	1
	Corporation Service Company		PR-7 AN 8:53 ETARY OF STAIN HASSEE, FLORES	{
	NEW Registered Office Address:	•		
	1201 Hays Street			
	Tallahassee , FI	32301		
agent was/w	limited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li- tere authorized by the armative vote of the members of icles of figure 1.	registered office a ability company, it of the limited liabil limited liability co	and the business office of the registered is hereby confirmed that the change(s) lity company or as otherwise provided in ompany.	e
Signa	ature of a member or authorized representative of a member	MULT	Printed or typed name of signee	_
I here provis the ob to mer notifie	thy accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address. It is in writing of this change. With assistent ya procunt	we to act in this ca	macity. I further garee to comply with the	Į.