

# Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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**To:**

Division of Corporations  
Fax Number : (850)617-6383

**From:**

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.  
Account Number : 110432003053  
Phone : (561)694-8107  
Fax Number : (561)694-1639

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

**Email Address:** \_\_\_\_\_

## LLC REGISTERED AGENT CHANGE 9521 PINE CONE DRIVE, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR  
BOTH FOR LIMITED LIABILITY COMPANY**

2020-11-11 AM 9:59

1. The name of the limited liability company is: 9521 Pine Cone Drive, LLC

2. (a) Principal office address of the limited liability company: 3075 NW SOUTH RIVER DRIVE  
MIAMI, FL 33142  
**(Note: MUST BE STREET ADDRESS)**

(b) Mailing address of limited liability company: 3075 NW SOUTH RIVER DRIVE  
MIAMI, FL 33142  
**(Note: MAY BE POST OFFICE BOX)**

2/11/2019

L19000041419

3. Date of filing/registration in Florida

4. Document number

5.(a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: PARDO JACKSON GAINSBURG, PL  
Registered Office Address: 200 S.E. FIRST STREET  
700  
MIAMI, FL 33131

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address:**

**NEW** Registered Agent: Corporate Creations Network Inc.

**NEW** Registered Office Address: 801 US Highway 1

**(MUST BE FLORIDA STREET ADDRESS)**  
North Palm Beach FL 33408

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

(Signature of a member or authorized representative of a member)

Anthony Dispenza, Attorney-in-Fact

(Printed or Typed name of signee)

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

Anthony Dispenza, Special Secretary  
(Signature of Registered Agent)

**Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314**

(NHS)8(10/99)

Corporate Creations International

801 US Highway 1

North Palm Beach FL 33408

(561) 694-8107