

219000041419

Florida Department of State
Division of Corporations
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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

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

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

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2020 MAY -1 AM 10:23

2020 MAY -1 AM 9:59

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.

(Signature of Registered Agent) Anthony Dispenza, Special Secretary

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