

L21000225644

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

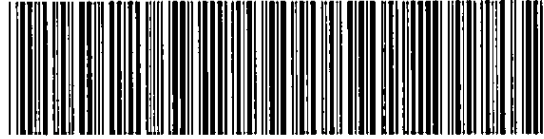
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2021 DEC 13 AM 8:42

FLORIDA SECRETARY OF STATE
TALLAHASSEE, FL

Y SULKER

DEC 14 2021

XXRPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 321938 7986366

AUTHORIZATION

[Handwritten Signature]

COST LIMIT : \$55.0

ORDER DATE : December 13, 2021

ORDER TIME : 3:0 PM

ORDER NO. : 321938-005

CUSTOMER NO: 7986366

CHANGE OF AGENT

NAME: 1818 SE10 STREET LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX _____ CERTIFIED COPY
_____ PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 1818 SE 10 Street LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Seth Cohen
Name of Person

1818 SE 10 Street LLC
Firm/Company

1002 E Newport Center Drive, Suite 200
Address

Deerfield Beach, FL 33442
City/State and Zip Code

KLEVERETTE@INSURANCECAREDIRECT.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KIM LEVERETTE at (919) 618-7011
Name of Person Area Code & Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
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

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: 1818 SE 10 Street LLC

2. (a) 1002 E. NEWPORT CENTER DRIVE (b) 1002 E. NEWPORT CENTER DRIVE

Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

DEERFIELD BEACH, FL 33442

DEERFIELD BEACH, FL 33442

5/18/2021

L21000225644

3. Date of filing/registration in Florida

4. Document number

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

115 NORTH CALHOUN STREET, SUITE 4

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

TALLAHASSEE, FL 32301

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

Corporation Service Company

NEW Registered Office Address:

1201 Hays Street

Tallahassee, FL 32301

FILED
MAY 13 2021
TALLAHASSEE, FL
11 AM 8:42

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.

Seth Cohen
477A74AC28E34E5
Signature of a member or authorized representative of a member

Seth Cohen
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]
Signature of Registered Agent