## M14000006053

(Re	equestor's Name)					
(Address)						
(Address)						
(Cit	ty/State/Zip/Phone	e #)				
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	s of Status				
Special Instructions to Filing Officer						
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Tallhassee, FL 32301 Phone: 850-558-1500									
ACCOUNT NO. : 12000000195									
REFERENCE : 024016 8334108									
AUTHORIZATION :									
COST LIMIT : \$ 25.00									
ORDER DATE: October 12, 2022									
ORDER TIME : 1:26 PM									
ORDER NO. : 024016-008									
CUSTOMER NO: 8334108									
CHANGE OF AGENT									
NAME: 141 EAST FLAGLER, LLC									
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:									
CERTIFIED COPY XX PLAIN STAMPED COPY									

EXAMINER'S INITIALS:

. CORPORATION SERVICE COMPANY

CONTACT PERSON: Eyliena Baker

1201 Hays Street

## 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.

l.	Na	me of the limited liability company: 141 EAST FLA	GLER, I	LLC	)	
2	(a)			(h)	C/O Man	a Wynwood
	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(17)		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
		318 N.W. 23rd. St.			318 N.W.	23rd. St.
		Miami, FL 33127	<u> </u>		Miami, Fl	_ 33127
		08/22/2014		i	M1400000	06053
3.		Date of filing/registration in Florida	4.	_	<u> </u>	Document number
5.	(a)					
٠.	(4)	Registered Agent and Registered Office shown on the records of Chung, Jay		da l	Dept. of Stat	_ e:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
		318 N.W. 23rd. St.				
		Miami	33127	7		_
					-	7.2.7.7.7.7.7.7.7.7.7.7.7.7.7.7.7.7.7.7
	(b)	Enter name of NEW Registered Agent and/or NEW Registered				- Carlo
		Enter name of NEW Registered Agent and/or NEW Registered	J Office 8	100	rev:	ラー ラー
		Corporation Service Company				SER IT
		NEW Registered Office Address:				
		1201 Hays Street				MELGHETARY OF STATE O
		Tallahassee FI	32301			_
cha age wa	ange ent w s/we	mited liability company is not organized under the last or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited lifter authorized by an affirmative vote of the members called the organization or the operating agreement of the	registe ability of of the li	red on mit	l office an ipany, it is ed liabilit	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
		ishe Mana		oisl	ne Mana,	Authorized Person
	_	ure of a member or authorized representative of a member				Printed or typed name of signee
pro the to i	ovisie vobli mere	ny accept the appointment as registered agent and agrows of all statutes relative to the proper and complete gations of my position as registered agent as provide by reflect a change in the registered office address, I will not this change.	ree to ac perforn d for in hereby c	et it nar Ch con	n this cape ice of my e apter 605 firm that	acity. I further agree to comply with the duties, and I am familiar with and accept . F.S. Or, if this document is being filed the limited liability company has been
	gnatur	e of Registered Agent \ E. Kirby, Asst. Vice President				

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FILING FEE: \$25.00