L21000 421 345

(Requestor's Name)				
(Address)				
(Address)				
(City	//State/Zip/Phon	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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02/22/24--01907--004 **1075.00



COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJ	1000 99TH STREET, LLC				_
		Name of Limite	ed Liability Company		
Dear	Sir or Madam:				
The e	nclosed Registered Agent/Registere	d Office Change	and fee(s) are submitted for filing		
Please	e return all correspondence concerni	ng this matter to	the following:		
Kylie	Conrad & Kayla King				
	Name of Person				
Corpl	.Inc.			SECRI TALI	2024 MAR 22
	Firm/Company				R 2%
7700	E Arapahoe Rd Ste 220			ASSE ASSE	PN
	Address				2:5
Cente	nnial, CO 80112			, 11,	_
	City/State and Zip C	ode			
	E-mail address: (to be used for future	re annual report i	notification)		
For fi	irther information concerning this m	atter, please call	:		
Kylie	Conrad	720 at (823-9273		_
	Name of Person		Area Code & Daytime Tele	phone Numbe	er
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahasse 2415 N. Monroe Street. Tallahassee, FL 32303	ee	
	Enclosed is a check for the follo	owing amount:			
	■ \$25 Filing Fee	(355 Filing Fee & Certified Cop	iÀ.	

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.

. Na	ame of the limited liability company:1000 99TH STRE	ET.L	LC		
2. (a)	9380 Bay Dr		(b)	x 546528	
(11)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)	-	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Surfside, FL 33154		-	Surfside.	FL 33154
	09/23/2021		L.	21000421	1345
5. 5. (a)	Date of filing/registration in Florida CORPORATION SERVICE COMPANY	4.	_		Document number
	Registered Agent and Registered Office shown on the records of 1201 HAYS STREET	the Flo	rida I	Dept. of Sta	ate:
	Registered Office Address (MUST BE FLORIDA STREET) SUFFE 100	ADDRI	ESS)	_	
(b)	TALLAHASSEE, FL	3230	1-252	15	2024 SEC
	Registered Agents Inc				TALLAH
• ,	Enter name of NEW Registered Agent and/or NEW Registered Office address:				
	7901 4th St N				PH 2:5
	NEW Registered Office Address:				FA 51
	Ste 300				<u> </u>
	St. Petersburg, FI	3370	2		<u> </u>
change agent v was/wo he arti	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited have ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the YITZHAK STERN	regist ability of the limite	tered con limit ed lia	office a pany, it ed liabili	is hereby confirmed that the change(s) ity company or as otherwise provided in impany.
	ture of a member or authorized representative of a member	-		e	Printed or typed name of signee
I here provisa the obt	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. It d'in writing of this change.	perjoi d for i	rman n CI	ice oj mv ianter 60	y auries, and 1 am jamiliar with tina accepts. 15. F.S. Or, if this document is being filed
	vid Roberts				
Signate	ire of Registered Agent				