# that my name appears above, or on an attachment with all other like empowered.

#### SIGNATURE: JOHN MCCANN

Electronic Signature of Signing Authorized Person(s) Detail

#### **Current Principal Place of Business:** 333 SE 2ND AVENUE DELRAY BEACH. FL 33483

**Current Mailing Address:** 

## 333 SE 2ND AVENUE

DOCUMENT# L17000064734

DELRAY BEACH. FL 33483

#### FEI Number: 82-0949393

#### Name and Address of Current Registered Agent:

MCCANN, JOHN 333 SE 2ND AVENUE DELRAY BEACH, FL 33483 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

#### SIGNATURE: JOHN MCCANN

Electronic Signature of Registered Agent

#### Authorized Person(s) Detail :

Title	MGR
Name	MCCANN, JOHN
Address	333 SE 2ND AVENUE
City-State-Zip:	DELRAY BEACH FL 33483

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and

Certificate of Status Desired: No

10/21/2019 Date

10/21/2019

### FILED Oct 21, 2019 Secretary of State 0028305358CR

RA

Date

### 2019 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

Entity Name: LIGHTHOUSE REAL ESTATE PARTNERS, LLC