LOZ 0000000404

(Requestor's Name)						
(Address)						
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PICK-UP WAIT MAIL						
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(Business Entity Name)						
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Special Instructions to Filing Officer:						
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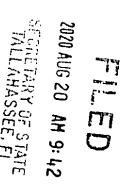
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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@csclgobal.com

Date: August 18, 2020

Order#: 394441/015

Re: LAKEVIEW, LLC

Enclosed please find:

XX ___ Change of Registered Agent and Office.

XX Check in the amount of \$25.

Please take the following action:

XX File in your office on a routine basis.

XX ___ Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Ami Casper c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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.	Na	me of the limited liability company: LAKEVIE	EW, LLC				
っ	(a)	1555 Palm Beach Lakes Boulevard, Suite 1100	0	(b)			
	(2)	Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	алу;	- (0)-	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
		West Palm Beach, FL 33401		- - 			
		12/31/2001		L0	200000404		
3.		Date of filing/registration in Florida		4.	Document number		
5	(a)	Nannette Gammon					
٥.	(4)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:					
		1555 Palm Beach Lakes Boulevard, Suite 110	00				
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
		West Palm Beach	, FL_	33401			
		Corporation Service Company					
		NEW Registered Office Address:					
		1201 Hays Street					
		Tallahassee	, FL_	32301			
ch ag wa	ange ent v 15/we	or changes are made, the Florida street address vill be identical. Or, in the case of a Florida lim	s of the re nited liab mbers of	egistered only ility comparts the limite	pany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in		
		ill Cilmi		Jill Cilr	ni, Authorized Person		
	•	ture of a member or authorized representative of a membe			Printed or typed name of signee		
pr the to	ovisi 2 obl mere	by accept the appointment as registered agent a ons of all statutes relative to the proper and con igations of my position as registered agent as p ely reflect a change in the registered office addr I in writing of this change.	ind agree mplete po provided ress, I he	e to act in erformanc for in Cha ereby confi	this capacity. I further agree to comply with the e of my duties, and I am familiar with and accept pter 605, F.S. Or, if this document is being filed irm that the limited liability company has been		
<u></u>		Clum Key	Coi	rporation	Service Company		
51	gnatu	re of Registered Agent	Am	ni M. Cas	per, Asst. Vice President		