LOW 0000 L87570

(Re	equestor's Name)			
(Ad	dress)			
(۸0	uress;			
(Address)				
(Cil	ty/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
<u> </u>				
Special Instructions to Filing Officer:				
J. HORNE				
APR 1 1 2025				

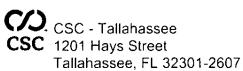
Office Use Only



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2025 APR 10 AM 11: 23

FILED 2025 APP: 10 FH 4: 24



850-558-1500, Ext: x61563

To: Department Of State, Division Of Corporations

From: Shauna Godbolt - Shauna.Godbolt@cscglobal.com

Ext: x61563
Date: 04/10/25
Order #: 1927833-1
Re: 7395 BUILDING, LLC
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Change of Registered Agent and Office

Check in the amount of: \$25.0 - FL State Account Number: I20000000195

Please take the following action:

File on a routine basis Issue proof of filing Return evidence to the following: ATTN: Shauna Godbolt c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Special Instructions:

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

Decement.

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. N	ame of the limited liability company: 7395	BUILDING, LLC	
2. (a)	6801 SW 99 TER PINECREST, FL 33156	(t	6801 SW 99 TER PINECREST, FL 33156
~. (u)	Principal office address of limited liability co (Note: MUST BE STREET ADDRES)	ompany;	Mailing address of limited liability company: **CNote: MAY BE POST OFFICE BOX**)
2	07/13/2006		L06000069870
3.	Date of filing/registration in Florid DAN, SANDRA L	la 4.	Document number
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 6801 SW 99 TERRACE Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		5)
	PINECREST		2025
(b)	Enter name of NEW Registered Agent and/or NEW Corporation Service Company NEW Registered Office Address: 1201 Hays Street	['] Registered Office ad	2025 APR 10 PN 1: 24
	Tallahassee	, FL ³²³⁰¹	
change agent was/w the art	e or changes are made, the Florida street addr will be identical. Or, in the case of a Florida are authorized by an affirmative vote of the r icles of organization or the operating agreem	ress of the registere limited liability co nembers of the lim ent of the limited l	State of Florida, it is hereby confirmed that after the ed office and the business office of the registered ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in iability company. an Kiguel, Member
	ulian Kiguel ture of a member or authorized representative of a mer		Printed or typed name of signee
I here provis the obi to mer	by accept the appointment as registered age	nt and agree to act	in this capacity. I further agree to comply with the ance of my duties, and I am familiar with and accept Chapter 605, F.S. Or, if this document is being filed onfirm that the limited liability company has been

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

COA-249191 FILING FEE: \$25.00