(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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Special Instructions to Filing Officer:				
JUL 27 2023				

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## **COVER LETTER**

TO:

INHS18 (2/14)

TO: Registration Section Division of Corporations							
3200 OCEAN 203, LLC SUBJECT:							
Name of Limited Liability Company							
Dear Sir or Madam:							
The enclosed Registered Agent/Registered Office Char	nge and fee(s) are submitted for filing.						
Please return all correspondence concerning this matter	r to the following:						
MARK TOURIN							
Name of Person	<del> </del>						
3200 OCEAN 203 LLC							
Firm/Company	<del></del>						
100 N.E. 6TH ST. UNIT#107							
Address							
BOYNTON BEACH, FL. 33435							
City/State and Zip Code	<del></del>						
ZMANAGEMENTS@AOL.COM							
E-mail address: (to be used for future annual repo	ort notification)						
For further information concerning this matter, please	call:						
MARK TOURIN 5	369-3343						
Name of Person	Area Code & Daytime Telephone Number						
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303						
Enclosed is a check for the following amoun	ıt:						
■ \$25 Filing Fee	S55 Filing Fee & Certified Copy						

## 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: 3200 OCEAN 20	03 LLC			
2. (a)			(b)		
( )	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	· <del></del>		Mailing address of limi (Note: MAY BE PC	ited liability company: OST OFFICE BOX)
	100 N.E. 6TH ST. UNIT#107		100 N.E. 6	TH ST. UNIT#107	7
	BOYNTON BEACH, FL 33435		BOYNTO	N BEACH, FL. 3343	35
	11/16/2006		L060001110	020	
3.	Date of filing/registration in Florida	4.		Document numbe	r
5. (a)	LIMITED AGENT SERVICES LLC				
J. (a)	Registered Agent and Registered Office shown on the records of	of the Flori	da Dept. of State	- e:	
	Registered Office Address (MUST BE FLORIDA STREET	T ADDRE.	<u>SS)</u>	_	200 200
	1111 BRICKELL AVENUE SUITE 2200				SECRETA SECRETA 2023 MAY
	MIAMI, F	L_33131		-	FIL ETARY OF C
/ <b>L</b> .\	MARK TOURIN				) AT
(b)	Enter name of NEW Registered Agent and/or NEW Registered	ed Office :	address:	_	81AIE 8: 2
					<u> </u>
	NEW Registered Office Address:			_	
	100 N.E. 6THH ST. UNIT#107			_	
	BOYNTON BEACH	L_33435		_	
change agent v was/we	imited liability company is not organized under the last or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lare authorized by an affirmative vote of the members cles of organization or the operating agreement of the	ie registe liability of the li e limited	ered office an company, it is mited liabilit	d the business offices hereby confirmed by company or as of the pany.	ce of the registered d that the change(s)
Signa	ture of a member or authorized representative of a member	-		Printed or typed name	ic of signce
I herei provisi the obl to mere notified	by accept the appointment as registered agent and agons of all statutes relative to the proper and complet igations of my position as registered agent as providely reflect a change in the registered office address, a dip writing of this change.	gree to a le perfori led for in l hereby	ct in this cap mance of my Chapter 603 confirm that	acity. I further agg duties, and I am fa 5, F.S. Or, if this d the limited liability	ree to comply with the miliar with and accept ocument is being filed v company has been