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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Fax Number : (855)330-1010

\*\*Enter the email address for this business entity to be used for future on annual report mailings. Enter call and annual report mailings. annual report mailings. Enter only one email address please.\*\*

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## LLC REGISTERED AGENT CHANGE COHEN & COHEN PROPERTIES, LLC

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## 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: Cohen &	Cot	ne	n Proj	perties, LLC	
2. (		8201 N. HIMES AVENUE	(	(b) PO Box 270651			
<u> </u>	a) ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`	.0) _		Mailing address of limited liabilit (Note: MAY BE POST OFFICE)	
		TAMPA, FL 33614		-	TAMPA	, FL 33688	
				_			
		05/21/07		L	070000	053690	
3.		Date of filing/registration in Florida	4.	_		Document number	
5.	f +1\	BRUCE S. GOLDSTEIN, P.A.					
٠,٠	(a)	Registered Agent and Registered Office shown on the records of	the Florid	da D	ept. of State	· ?	
		500 EAST KENEDY BLVD.					
		Registered Otfice Address (MUST BE FLORIDA STREET	ADDRES	<u>(S)</u>		232	
		SUITE 101-A				ن پ	<u>:</u>
		TAMPA	3360	)2		2020 JUI.	- -
							~o
(	b)	Registered Agents Inc.					PH 12: 1
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	<u>a Office a</u>	dar	<u>ess</u> :		-
		7901 4th St N					CJ
		NEW Registered Office Address:					
		STE 300					
		St. Petersburg	_3370	2			
If th	w li	mited liability company is not organized under the la	ws of th	ie S	tate of Flo	orida it is hereby confirme	d that after
the age was	cha nt v /we	nge or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited I are authorized by an affirmative vote of the members	f the reg iability o of the li	giste con mit	ered office pany, it is ed liability	e and the business office of s hereby confirmed that the y company or as otherwise	the registered change(s)
the	arti	cles of organization or the operating agreement of the				ipany.	
$\frac{2}{s_i}$	Ignai	ture of a member or authorized representative of a member	<u> </u>	ıey	Park	Printed or typed name of signed	;
I hopro the to n	erei visi obl nere	by accept the appointment as registered agent and agents of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address. It is spriting of this change.  Bill Havre - Assistant	e perfori ed for in hereby	man Ch con	ice of my e apter 605 firm that	duties, and Lam Jamiliar w E. F.S. Or. if this document	uin ana accepi Lis being filed
Sie	natu	re of Registered Agent					