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(Requestor's Name)					
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(City/State/Zip/Phone #)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
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Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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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: Carissa Koetitz carissa.koetitz@cscqlobal.com

Date: April 15, 2021

Order#: 765449/005

Re: ST. AUGUSTINE RETAIL HOLDINGS, LLC

Enclosed please find:

XX ___ Change of Registered Agent and Office.

 \overline{XX} Check in the amount of \$25.00.

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:Carissa Koetitz 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. No	ame of the limited liability company: ST. AUGUSTINE	RETAI	L HOLDING	GS, LLC
2. (a)	939 Hollywood Blvd.	(t	939 Holly	wood Blvd.
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Deltona, FL 32725	-	Deltona, I	FL 32725
	03/24/2008		L0800002	9765
3.	Date of filing/registration in Florida	4.	-	Document number
5. (a)	Corporation Service Company			
(h)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 1201 Hays Street			PT L. 2021 APR 21 TALLAHASS
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			R2
	Tallahassee, FL_	32301		P P
	BIERNACKI, RAYMOND AJR.			S IVITE A PLORIDA
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :			ŕ
	2667 ENTERPRISE ROAD			
	NEW Registered Office Address:			_
	ORANGE CITY, FL_	32763		-
change agent v was/we	imited liability company is not organized under the law or changes are made, the Florida street address of the r will be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liab	registere bility co Tthe lim	ed office and mpany, it is ited liability	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
/s/ Jill (Jill (Cilmi, Autho	orized Person
I here provisi the obl to mere notified	ture of a member or authorized representative of a member by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I he I in writing of this change.	ve to act performa for in C erchy co	in this cape mee of my o hapter 605 ngirm that i	Printed or typed name of signee acity. I further agree to comply with the duties, and I am familiar with and accept , F.S. Or, if this document is being filed the limited liability company has been
Signatu Grace E	re of Registered Agent Kirby, Asst. Vice President on behalf of Corporation Service Comp	pany		

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00