## 109000053857

(Requestor's Name)				
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(City/State/Zip/Phone #)				
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195					
REFERENCE : 425057 7586636					
AUTHORIZATION : Spelle Reco					
COST LIMIT : \$ 25.00					
ODDED DAME. Oreston 4 2010					
ORDER DATE: October 4, 2018					
ORDER TIME : 4:40 PM					
ORDER NO. : 425057-005					
CUSTOMER NO: 7586636					
CHANGE OF AGENT					
NAME: COMREALTY GROUP, LLC					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY					
CONTACT PERSON: Emily Croft EXT# 62925					
EXAMINER:					

## 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.

I. N	ame of the limited liability company: COMREALTY C	GROUP,	P. LLC
2. (a)		(b	(b)
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	('	Mailing address of limited liability company;
			(Note: MAY BE POST OFFICE BOX)
	210 Hillsboro Technology Drive	_	210 Hillsboro Technology Drive
	Deerfield Beach, FL 33441	_	Deerfield Beach, FL 33441
	06/03/2009		L09000053857
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	FALDUTO, MARY C		
,	Registered Agent and Registered Office shown on the records of t	he Florida	da Dept. of State:
	Registered Office Address (AIUST BE FLORIDA STREET A	Anneces	
		DURESSI	<u>n</u>
	210 Hillsboro Technology Drive		
		33441	1
(b)	Corporation Service Company		OCT -5
	Enter name of NEW Registered Agent and/or NEW Registered (	Office add	
	1201 Hays Street		三····································
	NEW Registered Office Address:		PH II: 0%
			A STATE OF THE STA
	Tallahassee	20004	
	, FL_	32301	·· <del>·</del>
igent w vas/we	mited liability company is not organized under the law- nge or changes are made, the Florida freet address of t vill be identical. Or, in the case of a Florida limited liab re enthorized by an additionally of organization of the li- cles of organization of the aperantic agreement of the li	the registration the times	ompany, it is hereby confirmed that the change(s)
Signatu	2 see ( )	Micha	hael Shafir, Secretary
	ure of a member or authorized representative of a member		Printed or typed name of signee
ie obli P <del>perc</del>	y accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p gations of my position as registered agent as provided by reflect a change in the registered office address. I he fin writing of this change	e to act in erforman for in Ch creby con	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
- 12	Manuellanie	- ,	Roxanne Turner
ignatun	of Registered Agent Corporation Service Company	BY:	Asst. Vice President

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