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(Requestor's Name)				
(Address)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MA	IL			
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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COVER LETTER

TO:

INHS18 (2/14)

Registration Section Division of Corporations GRE PROPERTIES BOCA RATON LLC SUBJECT: Name of Limited Liability Company Dear Sir or Madam: The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Nikita Basdeo Name of Person Ganot Capital LLC Firm/Company 4601 Sheridan Street, Suite 600 Address Hollywood, FL 33021 City/State and Zip Code nikitab@ganotcapital.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Nikita Basdeo Name of Person Area Code & Daytime Telephone Number STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: ☑ \$25 Filing Fee □ \$55 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.

1. Na	ame of the limited liability company: GRE PROF	PERTIES BO	CA RATON LLC
2. (a)	4601 Sheridan Street, Suite 600	(b) 40	601 Sheridan Street, Suite 600
	Principal office address of limited liability company:		Mailing address of limited liability company:
	(<u>Note: MUST BE STREET ADDRESS)</u> Hollywood, FL 33021	1.0.	(<u>Note: MAY BE POST OFFICE BOX</u>)
			ollywood, FL 33021
	02/26/2010		0000021846
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	CT Corporation		
J. (a)	Registered Agent and Registered Office shown on the records	of the Florida Dep	t. of State:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 1200 South Pine Island Blvd		25
	Plantation	33324	
(b)	Etan Mark		353
	Enter name of NEW Registered Agent and/or NEW Registered Office address:		
	Mark Migdal & Hayden		7 7 7
	NEW Registered Office Address:		<u></u>
	80 SW 8th Street, Suite 1999		
	Miami	_{FL} 33130	
agent was/we the arti	imited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited by an affirmative vote of the members cles of organization or the operating agreement of the understanding of a member of a member of a member of a member and agent and agent of all statutes relative to the proper and completing igations of my position as registered agent as providing the reflect a change in the registered office address,	of the registere liability compass of the limited liabil Harvey	d office and the business office of the registered my, it is hereby confirmed that the change(s) liability company or as otherwise provided in ity company. L. Lichtman Printed or typed name of signee his capacity. I further agree to comply with the
<i>понувес</i>	l'in writing of this change. re of Registered Agent	- 3	y sampany am acca