LIDDOU	5122425
(Requestor's Name) (Address) (Address)	700328127557
(City/State/Zip/Phone #)	APPROVED AND FILED SERVET OF SHAP MILLED TO SHAP
Certified Copies Certificates of Status	19 APP 18 PH 2:05
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I

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500		
ACCOUNT NO. : I2000000195		
REFERENCE : 731209 7392947		
AUTHORIZATION Spulle man		
COST LIMIT : 45 25.00		
ORDER DATE : April 18, 2019		
ORDER TIME : 11:37 AM		
ORDER NO. : 731209-005		
CUSTOMER NO: 7392947	- 王公 王公 201	
	U APR	22
CHANGE OF AGENT		>PRO
	THU ST	
NAME: CFT C PROPERTIES, LLC	8=27	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:		
CERTIFIED COPY XX PLAIN STAMPED COPY		
CONTACT PERSON: Lydia Cohen EXT# 62974		
EXAMINER:		

ť

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.	N	ame of the limited liability company: <u>CFT C PROP</u>	ERTIES, L	LC		
2.	(a)		(b)		
	\ <i>y</i>	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0		Mailing address of limited liabi (Note: MAY BE POST OF)	
		8226 Mount Thor Lane	_ ,	8226 Mo	ount Thor Lane	
		Boynton Beach, FL 33473		_Boynton	Beach, FL 33473	
2				L100001		
3.		Date of filing/registration in Florida	4.		Document number	
5.	(a)	Barry H. Swickle			-	
		Registered Agent and Registered Office shown on the records of	f the Florida	Dept. of Stat	e:	
		Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	2		2019
		8226 Mount Thor Lane				A1 2019 APR
		Boynton Beach , Fi	L_ 33473			FILL FILL
	(b)	Corporation Service Company			1S	0VEU ED AM-8:
	(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office add	iress:		
						4
		1201 Hays Street			_	
		<u>NEW</u> Registered Office Address:				
		Tallahassee, FI	32301			
lft	he li	mited liability company is not organized under the la	ws of the !	State of Flo	rida it is berehv confirm	d that after
ine age wa	cha nt w s/we	nge or changes are made, the Florida street address o ill be identical. Or, in the case of a Florida limited li re authorized by an affirmative vote of the members cles of organization or the operating agreement of the	f the regist ability cou of the limi	tered office mpany, it is ted liability	e and the business office or s hereby confirmed that the v company or as otherwise	f the registered
		211/1/4	Stefa	an H. Cushi	man	
		are of a member or authorized representative of a member			Printed or typed name of signe	
the to r	obli nere	y accept the appointment as registered agent and agons of all statutes relative to the proper and complete gations of my position as registered agent as provide by reflect a change in the registered office address, I in writing of this change.	ree to act : performa d for in C hereby co.	in this capa nce of my a hapter 605, nfirm that i	acity. I further agree to co duties, and I am familiar v , F.S. Or, if this documen the limited liability compa	omply with the with and accept t is being filed my has been
Sie	natur	of Registered Agent Company State		ydia Coh	07	
Jig		of Registered Agent Corporation Service Company	A	sst. Vice Presi	ident	
		Division of Corporations• P.O. FILING F			see, FL 32314	