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Division of Corporations

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From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)694-1639

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

0 JUL 22 PH 2: (

LLC REGISTERED AGENT CHANGE LENNAR GARDENS, LLC

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\$25.00

SECNETARY OF STATE

FILED

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: LENNAR GARL	ENS,	LLC					
2. (a)	700 N.W. 107th Ave		(b)_	700 N.W	7. 107TH AVE.			
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)_		Mailing address of limited ! (Note: MAY BE POST (
	Suite 400		5	uite 400	·			
	MIAMI, FL 33172			⁄ILAMI, I	FL 33172			
	01/06/2011		LI	1000002	755			
3.	Date of filing/registration in Florida	4.			Document number			
5. (a)	CT CORPORATION SYSTEM							
(-)	Registered Agent and Registered Office shown on the records of 1200 SOUTH PINE ISLAND ROAD			ot. of State	 :e:			
	Registered Office Address (MUST BE FLORIDA STREET)	1000	<u> </u>					
	PLANTATION , FL	3332	4		- - 2 - 2)))	2020 JUL	
(b)	Corporate Creations Network Inc.				ارا سار این مدر بازد مدر		IUL 22	=
	Enter name of NEW Registered Agent and/or NEW Registered	Office	addres	2;	>:``	:		'n
	801 US Highway 1				(2) (1) (1)	ا د ر	4H 9: L	D
	NEW Registered Office Address:				يو لشم 17	A T	46	
	North Palm Beach, FL	3340	8		-			
change agent v was/we	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liable authorized by an effirmative vote of the members of cles of organization by the operating agreement of the	regist bility f the limite	compa limited d liabi	ffice and my, it is liability lity com	d the business office of s hereby confirmed that y company or as otherw apany.	the the	registe chang	ered (c(s)
Sional	ture of a member or authorized representative of a member	_		GOSSIRA	in, Attorney-in-Fact Printed or typed name of si	gnee		
I herel provisi he obli o mere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I have in writing of this change. Denielle Gossman, Specie	perjoi I for i ereby	rmance n Chap confir	his capa of my a ter 605, m that t	ncity. I further notee to	con	nnlv w	rith the l accept 1g filed been
Signatur	re of Registered Agent	5001						