11/8/2019 Division of Corporations

L19000305745

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (514)280-3338
Fax Number : (954)208-0845

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

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LLC REGISTERED AGENT CHANGE
CINNIA PROPERTIES, LLC

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FAX COVER SHEET

TO	
COMPANY	
FAX NUMBER	18506176383
FROM	Kimberly Laughrey
DATE	2019-11-08 14:37:56 CST
RE	12393156 - CINNIA PROPERTIES, LLC

COVER MESSAGE

Robert Sholl
Fulfillment Associate
Global Fulfillment Operations
CT Corporation

Team 614-280-3338
GlobalFulfillmentTeam@wolterskluwer.com

Wolters Kluwer

1209 Orange Street Wilmington, DE 19801,
www.wolterskluwer.com

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. Name of the limited liability company: Cierra Properties, LLC

2. (a) 200 SOUTH BISCAYNE BLVD 7th Floor
Principal office address of limited liability company.
(Note: MUST BE STREET ADDRESS)

Miami, FL 33131

(b) same
Mailing address of limited liability company
(Note: MAY BE POST OFFICE BOX)

3. 05/11/2011
Date of filing/registration in Florida

4. L11000055345
Document number

5. (a) BRANT, BARRY M
Registered Agent and Registered Office shown on the records of the Florida Dept. of State

100 SOUTH BISCAYNE BLVD 7th Floor
Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

Miami, FL 33131

(b) C T Corporation System
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**.

NEW Registered Office Address
1200 South Pine Island Road

Plantation, FL 33324

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2019 NOV -8 A 8:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

LETHRENSA FAMILY TRUST COMPANY
Printed or typed name of signer

Mark Richford Kimberly Strachan

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

By: C T Corporation System
Lisa Dubois
Signature of Registered Agent

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314
Lisa Dubois, Asst. Secretary FILING FEE: $25.00