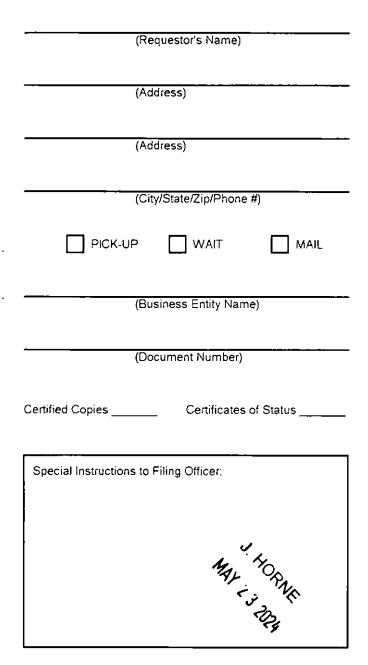
L11000093423



Office Use Only



300429062783

05/05/24--01020--009 **25.00



GREENFIELD MANAGEMENT POST OFFICE BOX 6307 BEVERLY HILLS, CALIEORNIA 90212 (310) 597-3662

April 24, 2024

John Joo 127 Lake Meryl Drive West Palm Beach, FL 33411

Re: LLC Agent for Service

Century Plaza

5750 – 5784 Okeechobee Blvd West Palm Beach, Florida 33417

Dear Mr. Joo:

I believe Matt spoke to you about this a while ago. We need you act as our agent for service for both properties, which would also include picking up our mail from the Postal Center at 5762-A Okeechobee Blvd., whenever we receive legal notices.

Please sign as registered agent and mail the entire package to the Divisions of Corporations in the envelope provided.

We thank you for your cooperation in advance. Please contact us should you have any questions.

Sincerely,

GREBNFIELD MANAGEMENT

Channing Shack

/cs

enclosures

COVER LETTER

ΓO: Registration Section Division of Corporations			
SUBJECT: ANBILLC			
Nar	me of Limited	Liability Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Off	fice Change ar	nd fee(s) are submitted for filing.	
Please return all correspondence concerning th	nis matter to th	ne following:	
Mahyar Dardashti			
Name of Person			
ANBI LLC .			
Firm/Company			
P.O. Box 6307			
Address			
Beverly Hills, CA 90212			
City/State and Zip Code			
E-mail address: (to be used for future an	nual report no	tification)	
For further information concerning this matter	t please call:		
Mahyar Dardashti	at (<u>310</u>) 597-3662	
Name of Person	· · · · · · · · · · · · · · · · · · ·	Area Code & Daytime Telephone Number	
Mailing Address:		Street Address:	
Registration Section		Registration Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327		The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enclosed is a check for the following	g amount:		
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy		

INHS18 (2/14)

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	lame of the limited liability company: ANBI LLC				
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	5762-A Okeechobee Blvd., #202		P.O. Box	6307	
	West Palm Beach, FL 33417		Beverly I	fills. CA 90212	
	08/15/2011		L11000093	3423	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a	ı)				
•	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
	Fabian Irurueta				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			- I	
	5762-A Okeechobee Blvd., #202			- P4 H	
	West Palm Beach , FI	_33417	Office address:		
				PP	
(b	Enter name of NEW Registered Agent and/or NEW Registered Office address:			- 10 F.	
				9 9	
	John Joo			'	
	NEW Registered Office Address:			_	
	5762-A Okeechobee Blvd., #202		<u>-</u>	_	
	West Palm Beach . FI	33417			
chang agent was/v	limited liability company is not organized under the large or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited likere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	ws of the registe ability of the li limited	ne State of Flored office are company, it mited liabili	lorida, it is hereby confirmed that after the nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany.	
Sign	nature of a member or authorized representative of a member	141	anyar Daruas	Printed or typed name of signee	
I her provi the or to me	weby accept the appointment as registered agent and agrees sions of all statutes relative to the proper and complete bligations of my position as registered agent as provide welly reflect a change in the registered office address, I see in writing of this change.	ree to a perfori d for in hereby	ct in this cap nance of my Chapter 60 confirm that	vacity. I further agree to comply with the	
Signa	ture of Registered Agent				

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