Florida Department of State Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 : (888)706-7274 Fax Number

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 ROSEN LARGO PARTNERS, LLC

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TO: Registration Section Division of Corporations

, ROSEN LARGO PARTNERS, LLC

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:

Joshua I	Name of Person
Registered Ag	gent Solutions, Inc.
	Firm/Company
Corporate Ce	nter One, 5301 Southwest Pkwy, Ste 400
****	Address
Austin, TX 78	735
	City/State and Zip Code

For further information concerning this matter, please call:

J	os	hua	Mur	р	hy

888

705-7274

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Enclosed is a check for the following amount:

□ \$25 Filing Fee

□ \$55 Filing Fee & Certified Copy

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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

Florid							
1. Na	ame of the limited liability company: ROSEN	LARG	O PARTI	NERS, LI	_C		
2. (a)	40 EAST 69TH STREET		, 40 EA	ST 69TI	H STF	REE	T
2. (a)	Principal office address of limited liability company:		M	ailing address of	limited liabi	lity comp	any:
	(<u>Note: MUST BE STREET ADDRESS</u>)			(<u>Note: MAYBE</u> VODK N		TCE BU	. <u>v</u>)
	NEW YORK, NY		INEAA	YORK, I	<u> </u>		
	1/17/2012		L12000	008184	 -		
3.	Date of filing/registration in Florida	4.	ī	Document num	iber		
5 (n)	BLUMBERGEXCELSIOR CORPORATE S	SERVICE	ES, INC.				
5. (a)	Registered Agent and Registered Office shown on the records 155 OFFICE PLAZA DR	of the Flori	la Dept. of State:				
	Registered Office Address (MUST BE FLORIDA STREE 1ST FLOOR Suite 201	T ADDRES	<u>S)</u>				
	TALLAHASSEE	_{FI} 323	01		_	20	
(b)	Registered Agent Solutions, Inc. Enter name of NEW Registered Agent and/or NEW Register		ddraes:		-	2022 JUN 2 I	: :
	Enter name of NEW Registered Agent and on NEW RESISTE	tu mice	<u>uu1 (33</u> .			-	
	155 Office Plaza Dr.					<u> </u>	(7) -
	NEW Registered Office Address:					2	Ţ
	Suite A				·	27	
	Tallahassee	_{FL} 323	01				
the ch agent was/w	limited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member ticles of organization or the operating agreement of t	of the reg Hiability of Sof the li he limited	istered office company, it is mited liability liability com	and the busing hereby confirst company or a pany.	ess office med that the s otherwise	of the re he chan se provi	egistered ge(s) ded in
s/ Jo	erome Robbins, Esq.	Je	rome Robb	ins, Esq.	Authori	zed P	erson

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.

Printed or typed name of signee

Signature of Registered Agent

Signature of a member or authorized representative of a member

Mackenzie Hart, Asst. Secretary