## L12000052146

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone #)	)		
PICK-UP	MAIT	MAIL		
(Bù	siness Entity Name)			
(Document Number)				
Certified Copies	Certificates of	Status		
Special Instructions to Filing Officer:				

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Y SULKER OCT 27 2021 CORPORATION SERVICE COMPANY
1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195				
REFERENCE : 159856 7779145				
AUTHORIZATION:				
COST LIMIT : \$ 25.00				
ORDER DATE : October 22, 2021				
ORDER TIME : 2:31 PM				
ORDER NO. : 159856-017				
CUSTOMER NO: 7779145				
CHANGE OF AGENT				
NAME: C/LEJEUNE, LLC				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY XX PLAIN STAMPED COPY				
CONTACT PERSON: Eyliena Baker EXT#				

EXAMINER: \_\_\_\_

## 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:	_C	
2. (a)	2020 Salzedo Street, 5th Floor	(b) 2020 Salzedo Street, 5th Floor	
2. (u)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of	limited liability company: E POST OFFICE BOX)
	CORAL GABLES, FL 33134	CORAL GABLES, FL 33	134
	04/17/2012	L12000052146	
<ul><li>3.</li><li>5. (a)</li></ul>	Date of filing/registration in Florida ROMERO, RAFAEL G	4. Document nun	nber
J. (u)	Registered Agent and Registered Office shown on the records of 2020 Salzedo Street, 5th Floor	· 	
	Registered Office Address (MUST BE FLORIDA STREET)	<u>ADDRESS)</u>	
	CORAL GABLES . FL	33134	707
(b)	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company	l Office address:	CT 26
	NEW Registered Office Address: 1201 Hays Street		AM 10: 21:
	Tallahassee , FI.	32301	
change agent vwas/www.the arti-	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 liagree authorized by an affirmative vote of the members of cles of organization or the operating agreement of the ture of a member or authorized representative of a member by accept the appointment as registered agent and agricular of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address. It din writing of this change.	registered office and the business of ability company, it is hereby confirm of the limited liability company or a limited liability company.  Jill Cilmi, Authorized Person  Printed or typed of the capacity. I further	office of the registered med that the change(s) s otherwise provided in name of signee
	Drace t-Kuby		
	re of Registered Agent Kirby, Asst. Vice President of Corporation Service Company		