Division of Corporations 4/28/2021

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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LLC REGISTERED AGENT CHANGE CYA PROPERTIES, LLC

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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 Florida

1.	Na	me of the limited liability company: CYA PROPER	TIES.	, LLC			,			
2.	(a)	1480 6TH AVENUE NW	(b) 1480 6TH AVENUE NW							
	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ '\	7	_		of limited			-
		LARGO, FL 33770	_	LARC	GO, FL 30	3770	·			
		05/04/2012	=		0062006			<u> </u>		
3.		Date of filing/registration in Florida	4.		Docum	nent n	umber			
5.	(a)	Fauzia Makar								
•	(••)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 1875 Indian Rocks Road S								
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)								
		Largo , FL 3	3774							
(b)	(b)	Corporate Creations Network Inc.								
	• "	Enter name of NEW Registered Agent and/or NEW Registered Office address:								
		801 US Highway 1						22		
		NEW Registered Office Address:						MPR 28		
		North Palm Beach FL 3	3408				1803E	₩ 10:		
the age wa	cha ent v s/we	mited liability company is not organized under the lawsinge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liability authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liability.	he regi pility co the lin imited	stered of ompany, nited liab liability	ffice and the it is hereboility comp	ne bus y coni pany o	iñess of firmed t r as othe	fice of hat the erwise	f the reg e chang	gistered e(s)
- 5	ignal	ure of a member or authorized representative of a member			Printed	or typ	ed name o	of signe	e	
pro the to	ovisi obl mere	by accept the appointment as registered agent and agre- ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I he I in writing of this change.	erform	unce of i	my duties .	and t	am lam	iliar w	vith and	t accept
Sig	natu	Jenisa Irizarry, Special S	ecret	ary						