K12000 105295

(Req	uestor's Name)			
(Add	ress)			
(Add	ress)			
- (City	/State/Zip/Phone			
(City	/State/Zip/Filoti	c #)		
PIÇK-UP	☐ WAIT	MAIL		
(Rus	iness Entity Nar	me)		
(DGS	iness Chuty Nai	ne)		
(Doc	ument Number)			
Certified Copies Certificates of Status				
Special Instructions to F	iling Officer:			
		:		



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Office Use Only

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COVER LETTER

Divisio	n of Corporations				
SUBJECT: L/	LA ILUSION PROPERTY INVESTMENT LLC				
	Name of Limited Liability Company				
Dear Sir or Mac	lam:				
The enclosed R	egistered Agent/Registered Office Chang	e and fee(s) are submitted for filing.			
Please return all	correspondence concerning this matter	to the following:			
Kristen Carte	er				
	Name of Person				
Paracorp Inc	orporated				
	Firm/Company				
2804 GATEV	VAY OAKS DRIVE #100				
	Address				
SACRAMEN	TO , CA 95833				
	City/State and Zip Code				
	@MYPARACORP.COM				
E-mail add	dress: (to be used for future annual repor	t notification)			
For further info	rmation concerning this matter, please ca	ill:			
KRISTEN CA	ARTERat (80	00 533-7272			
	Name of Person	Area Code & Daytime Telephone Number			
Registr Divisio Clifton 2661 E	ET/COURIER ADDRESS: ation Section n of Corporations Building xecutive Center Circle ssee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclose	ed is a check for the following amount	:			
☑ \$25	Filing Fee	☐ \$55 Filing Fee & Certified Copy			

TO: Registration Section

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

2. (a)		(1	b)		
- 1 (e)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		N	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) IE 163RD STREET, SUITE 403 H MIAMI BEACH, FL 33160	
	3323 NE 163RD STREET, SUITE 403		3323 NE		
	NORTH MIAMI BEACH, FL 33160		NORTH		
	08/22/2012		L1200010	08295	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	CORPORATE MAINTENANCE SERVICE	S, LLC			
J. (4)	Registered Agent and Registered Office shown on the records	of the Florid	a Dept. of State	:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			2022 3-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	
	1000 BRICKELL AVE STE 400				
(b)	MIAMI	_{FL} 33131		FIL 2022 HAY 25 SECRETARY PALLAHASSE	
	SETH G. COHEN, ESQ.				
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :				
	GRAYROBINSON, P.A.,			2: 25 Silving	
	NEW Registered Office Address:				
	301 E. PINE ST., STE. 1400				
	ORLANDO	_{FL} 32801			
the cha agent was/w	imited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of or any zation or the operating agreement of the case.	of the regi liability co s of the lin	stered office ompany, it is nited liability	and the business office of the registere hereby confirmed that the change(s) company or as otherwise provided in	
	from _	SE	SETH G. COHEN, ESQ.		
Signa	ture of a member or authorized representative of a member			Printed or typed name of signee	

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

notified in v

Signature of Registered Agent

this change.