412000/6/048

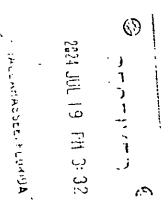
(F	Requestor's Name)			
(Address)				
(Address)				
	City/State/Zip/Phone #)			
PICK-UP	WAIT	MAIL		
	Suggest Estate Normal			
(1	Business Entity Name)			
(Document Number)				
Certified Copies	Certificates of S	Status		
Special Instructions to F	iling Officer;			
		1		
		J		

Office Use Only



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LLC RAGRO Change



NU-22 2021 ARAMSEY



CORPORATION SERVICE COMPANY 1201 Hays Street
Tallhassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000	195				
REFERENCE : 542649	7342469				
AUTHORIZATION :) D.				
COST LIMIT : \$(35.25	ena.				
ORDER DATE : July 9, 2024					
ORDER TIME : 1:0 PM					
ORDER NO. : 542649-001					
CUSTOMER NO: 7342469					
CHANGE OF AGENT					
NAME: CARLOS J. RODRIGUEZ FAMILY, LLC					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY					
CONTACT PERSON: Shauna Godbolt 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.

I. Na	ame of the limited liability company: CARLOS J. F	RODRIGUE.	Z FAMILY, LLC
2. (a)		(b	b)
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	255 ALHAMBRA CIRCLE SUITE 760		255 ALHAMBRA CIRCLE SUITE 760
	CORAL GABLES, FL 33134		CORAL GABLES, FL 33134
	12/27/2012		L12000161048
3 .	Date of filing/registration in Florida	4.	Document number
(0)			
5. (a)	Registered Agent and Registered Office shown on the records	of the Florida	a Dept. of State:
	Rodriguez, Carlos J.		
	Registered Office Address (MUST BE FLORIDA STREE	ET ADDRESS	
	255 ALHAMBRA CIRCLE SUITE 760		
	CORAL GABLES	FL_33134	a Dept. of State:
		1· L	
(b)			
(0)	Enter name of NEW Registered Agent and/or NEW Registe	red Office add	Idress:
	Corporation Service Company		
	NEW Registered Office Address:		
	1201 Hays Street		
	Tallahassee	_{E1} 32301	
		. r	
f the li	imited liability company is not organized under the	laws of the	State of Florida, it is hereby confirmed that after the
gent v	or changes are made, the Florida street address of t vill be identical. Or, in the case of a Florida limited	Hiability cor	ompany, it is hereby confirmed that the change(s)
vas/we	ere authorized by an affirmative vote of the member cles of organization or the operating agreement of the	rs of the limi	nited liability company or as otherwise provided in
	Carlos J. Rodriguez	_	los J. Rodriguez, Authorized Representative/Manager
	ture of a member or authorized representative of a member		Printed or typed name of signee
herel rovisi he obli mere	by accept the appointment as registered agent and a	igree to act ete performa ded for in C I hereby co.	in this capacity. I further agree to comply with the ance of my duties, and I am familiar with and accept Chapter 605, F.S. Or, if this document is being filed onfirm that the limited liability company has been
)	Chace C-Kuby	GRACE	E. KIRBY, ASST. VICE PRESIDENT
Signatui	re of Registered Agent		