

U13 0000 46660

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

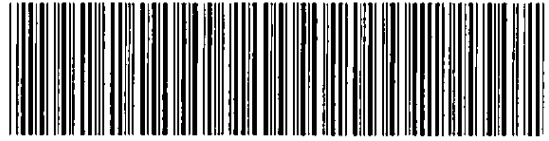
(Business Entity Name)

(Document Number)

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2024 JUN 18 AM 9:09

SECRETARY OF STATE
1100 PENNSYLVANIA AVENUE
HARRISBURG, PA 17133



15

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

ACCOUNT NO. : I20000000195
REFERENCE : 471241 7596800
AUTHORIZATION *[Signature]*
COST LIMIT : \$25.00

ORDER DATE : May 16, 2024
ORDER TIME : 4:16 PM
ORDER NO. : 471241-016
CUSTOMER NO: 7596800

FILED
2024 JUN 18 AM 9:09

CHANGE OF AGENT

NAME: 2701 BAYSHORE VENTURE, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Amanda Miller -- EXT#

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. Name of the limited liability company: 2701 BAYSHORE VENTURE, LLC

2. (a) _____ Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) <u>3310 Mary Street Suite 302</u> <u>Coconut Grove, FL 33133</u> <u>03/27/2013</u>	(b) _____ Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) <u>3109 GRAND AVENUE #349</u> <u>Coconut Grove, FL 33133</u> <u>L13000046660</u>
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3. 03/27/2013 Date of filing/registration in Florida 4. L13000046660 Document number

5. (a) _____
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

NRAI SERVICES, INC.
 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

(b) _____
 Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

Corporation Service Company
NEW Registered Office Address:
1201 Hays Street

Tallahassee, FL 32301

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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

_____ Signature of a member or authorized representative of a member	_____ JILL CILMI, AUTHORIZED PERSON Printed or typed name of signee
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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.

_____ Signature of Registered Agent	_____ GRACE E. KIRBY, ASST. VICE PRESIDENT
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