## 130006007

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DAVIBULE



CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 840068 7681421

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE: December 16, 2024

ORDER TIME : 12:41 PM

ORDER NO. : 840068-075

CUSTOMER NO: 7681421

\_\_\_\_\_\_

## CHANGE OF AGENT

NAME: OCEAN BEAR PROPERTIES, 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.

1. N	ame of the limited liability company: OCEAN BEA	R PROPER	TIES, LLC	
2. (a)		(h	)	
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing	address of limited liability company: : MAY BE POST OFFICE BON)
	5616 ARUNDEL DRIVE		P.O. BOX 58577	74
	ORLANDO, FL 32808		ORLANDO, FL	32858
	05/24/2013		L13000076007	
3.	Date of filing/registration in Florida	4.	Docur	ment number
5. (a)				
5. (a)	Registered Agent and Registered Office shown on the records	of the Florida	Dept. of State:	
	ASSURED COMPLIANCE SERVICES, LLC		•	
	Registered Office Address (MUST BE FLORIDA STREE	TADDRESS	<del></del>	
	1615 WOODWARD STREET		-	
	ORLANDO	32803		2024 \$1
		L 12	<del></del>	.024 DEC
(b)				
(-)	Enter name of NEW Registered Agent and/or NEW Registe	red Office ad	dress:	·
	Corporation Service Company			50 € 60 ± 10 ± 10 ± 10 ± 10 ± 10 ± 10 ± 10 ±
	NEW Registered Office Address:			22 11:
	1201 Hays Street			
	Tallahassee	32301		
			<del>- 1 -</del>	
chang agent was/w	limited liability company is not organized under the e or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of t	he registere liability co s of the lim	d office and the b mpany, it is hereb ited liability comp	usiness office of the registered y confirmed that the change(s)
/s/	Philip K. Calandrino	Phili	p K. Calandrino, A	Authorized Person
Signa	ature of a member or authorized representative of a member		Printec	for typed name of signee
I here	by accept the appointment as registered agent and a ions of all statutes relative to the proper and comple	gree to act le performa	in this capacity. I	l further agree to comply with the and I am familiar with and accept
the ob to mer notifie	ions of all statilies relative to the proper and comple ligations of my position as registered agent as provi ely reflect a change in the registered office address, d in writing of this change.	led for in C I hereby co	hapter 605, F.S. infirm that the lim	Or, if this document is being filed ited liability company has been