L13000105613

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JUL 12 2019 S. YOUNG

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LABILITY 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	ame of the limited liability company: COASTAL N	MARIN	E/f	RESIDEN	ITIAL SERVICES, LLC	
2. (a)	399 W PALMETTO PK RD #102		(b) 399 W PALMETTO PK RD #102			
2. (d)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) BOCA RATON, FL 33432		(0)	,	Mailing address of limited liability company: (Note: MAYBE POST OFFICE BOX) ATON, FL 33432	
	7/25/13	<u> </u>	i	1300010	05613	
3.	Date of filing/registration in Florida	4.			Document number	
5. (a)						
	Registered Agent and Registered Office shown on the records of	of the Flor	rida	Dept. of State	::	
	Registered Office Address (MUST BE FLORIDA STREE) 1499 W PALMETTO PARK RD STE 130	T.ADDRI	ESS)		ر 	
	BOCA RATON	_{FL} 3348	36		· · · · · · · · · · · · · · · · · · ·	
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	ed Office	add		2 7 3	
	NEW Registered Office Address:					
	399 W PALMETTO PK RD #102					
	BOCA RATON	_{FL} 3343	32			
the cha agent v was/we	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 are authorized by an affirmative vote of the members cles of organization or the operating agreement of the	of the re liability s of the l ne limite	gis col limi d li	tered office upany, it is ted liability ability con	and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in apany.	
Sig	tity of a member of authorized representative of a member	<u> </u>	EK	EMY BEI	Printed or typed name of signee	
ine opi. 10 mere	by accept the appointment as registered agent and a cons of all statutes relative to the proper and completigations of my position as registered agent as providily reflect a change in the registered office address. If in writing of this change.	gree to te perfor ded for i I hereby	act rma n C	in this cape nce of my c hapter 605 nfirm that	acity. I further agree to comply with the	

Signature of Registered Agent