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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

CONTACT PERSON: Eyliena Baker -- EXT#

Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE: 159856 7779145 AUTHORIZATION : COST LIMIT : \$ ORDER DATE: October 22, 2021 ORDER TIME : 5:15 PM ORDER NO. : 159856-107 CUSTOMER NO: 7779145 CHANGE OF AGENT NAME: PARCEL C1 PROPERTY, LLC PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: __ CERTIFIED COPY XX PLAIN STAMPED COPY

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: PARCEL C1 PR	OPERT	Υ,	LLC					
2. (a)	2020 Salzedo Street, 5th Floor	(1	b) _	2020 Sala	20 Salzedo Street, 5th Floor				
(**)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (~ / -	7	Mailing addre (<u>Note: MA</u>				
	CORAL GABLES, FL 33134	-	(CORAL G	DRAL GABLES, FL 33134				
	11/25/2013		Ľ	13000165	356				
3.5. (a)	Date of filing/registration in Florida ROMERO, RAFAEL G	4.			Document number				
J. (u)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 2020 Salzedo Street, 5th Floor				- ::	ري ري	202		
(b)	Registered Office Address (MUST BE FLORIDA STREET A	IDDRES.	<u>S)</u>		POZI OCT 2				
	CORAL GABLES . FL	33134				ta.	27 111		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> : Corporation Service Company <u>NEW Registered Office Address</u> :					- · ·	<u>ಬ</u> ಬ		
	1201 Hays Street								
	Tallahassee, FL	32301							
change agent was/w	limited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the l	registere bility co f the lim	ed o omp nite	office and pany, it is d liability	the busine hereby cor company	ess office afirmed t	of the	registered change(s)	
	iture of a member or authorized representative of a member	Jill Cilmi, Authorized Person Printed or typed name of signee							
I here provisi the obi to mer notifie	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address, I h d in writing of this change.	ve to act perform for in C ereby co	in anc Tha onf	this capa te of my a pter 605, irm that t	city. I furti	her avrei	e to cor	noly with the	
Signatu	Droze とKobly ire of Registered Agent E. Kirby, Asst. Vice President of Corporation Service Company								

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