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C. BRUMBLEY NOV - 9 2021

COVER LETTER

TO: Registration Section Division of Corporations			
HRC Dania LLC SUBJECT:			
	mited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Char	nge and fee(s) are submitted for filing.		
Please return all correspondence concerning this matte	r to the following:		
Veronica Rodriguez			
Name of Person	·		
HRC Dania LLC			
Firm/Company			
16855 NE 2nd Ave STE 305			
Address			
North Miami Beach, FL 33162			
City/State and Zip Code			
vmercedesrodriguez2@gmail.com			
E-mail address: (to be used for future annual repo	ort notification)		
For further information concerning this matter, please of	call:		
Veronica Rodriguez 9	54 483-8321		
Name of Person	Area Code & Daytime Telephone Number		
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
Enclosed is a check for the following amoun	t:		
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy		

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: HRC Dania LLC				
2. (a)	16855 NF 2nd Ave STF 305		(b) 16855 NE 2nd Ave STE 305		
2. (4.)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(*)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	STE 305		STE 30	05	
	North Miami Beach, FL 33162		North 1	Miami Beach, FL 33162	
	2/28/2014		L140000	036582	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	CT CORPORATION SYSTEM				
J. (u)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
	Registered Office Address (MUST BE FLORIDA STREET)	<u>ADDRE</u>	<u>S.S.</u>	202 See	
(b)	1200 S PINE ISLAND RD			300	
	PLANTATION, FL	33162		FILE 2021 OCT 25 AM 3ECT 25 AM	
	VERONICA FOLCIGUEZ				
	Enter name of NEW Registered Agent and/or NEW Registered Office address:		D 9: 49		
				. 9	
	NEW Registered Office Address:			<u> </u>	
	16855 NE 2ND AVE STE 305				
	NORTH MIAMI BEACH, FL	33162			
change agent v was/w	imited liability company is not organized under the lave or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited linere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	registe ability of of the li	red office company, mited liab Liability c	and the business office of the registered it is hereby confirmed that the change(s) ility company or as otherwise provided in company.	
Signa	ture of a member or authorized representative of a member	_	Dar	Printed or typed name of signee	
I here provisi the obl to mer notified	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ignitions of my position as registered agent as provided liverally reflect a change in the registered office address, I have a considered of the change of this change.	nerfori	ct in this c nance of n	apacity. I further agree to comply with the my duties, and I am familiar with and accept.	