## L14000059785

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



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18 OCT 15 AM 4: 3p

K. SALY OCT 1 6 2018 CORPORATION SERVICE COMPANY 1201 Havs Street

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	:	12000000	0195			
	REFERENCE	:	428549	8093611			
	AUTHORIZATION	:	VX	7			
	COST LIMIT	:	\$ 25.00	Elman			
ORDER DATE :	October 8, 2018						
ORDER TIME :	5:23 PM						
ORDER NO. :	428549-005						
CUSTOMER NO:	8093611						
CHANGE OF AGENT							
NAME:	ACUMEN REAL E	STA'	re viii, i	LLC			
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							
CERTIFIED COPY XX PLAIN STAMPED COPY							
CONTACT PERSO	N: Roxanne Turne	r -	- 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. 3	Name of the limited liability company: ACUMEN REA	L ESTAT	E VIII, LLC	
2. (a	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(b	o)	Aniling address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	20803 BISCAYNE BLVD, 501		20803 BIS	SCAYNE BLVD, 501
	AVENTURA, FL 33180	_	AVENTU	RA, FL 33180
	4/11/2014	<del></del>	L1400005	<del></del>
3.	Date of filing/registration in Florida	4.		Document number
5. (1	Registered Agent and Registered Office shown on the records of  CARLOS BERNER  Registered Office Address (MUST BE FLORIDA STREET)	the Florida		
	20803 BISCAYNE BLVD, 501			<u> </u>
	AVENTURA , FI	<u>33180</u>	)	CT TO
(b	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered	I Office ad	dress:	18 OCT 15 AM 4: 30
	1201 Hays Street  NEW Registered Office Address:	<del></del> -		3
	Tallahassee , FI	32301		
the cagen was/the a	climited liability company is not organized under the la hange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members enticles of organization or the operating agreement of the mature of a member or authorized representative of a member reby accept the appointment as registered agent and agains of all statutes relative to the proper and complete bligations of my position as registered agent as provide the proper and complete bligations of my position as registered office address, I writing of this change.	f the reginability confithe limited	stered office ompany, it is nited liability liability com	and the business office of the registered thereby confirmed that the change(s) y company or as otherwise provided in apany.  (os Be —— Printed or typed name of signee
nony	Hure of Registered Agent Corporation Service Company	BY:	Roxani	ne Turner e President