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## LLC REGISTERED AGENT CHANGE 1100 WEST 522 LLC

Certificate of Status	0
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5-14-19

## H19000158484 3

## 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. 1	Jame of the limited liability company: 1100 WEST	522 LLC		
2. (a)		(ሴ)	+ <u>_</u>	
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(*/	_	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	226 W CANTON ST UNIT			
	WELLESLEY HILLS, MA 2481			
	06/16/2014	L	_140000	96457
3.	Date of filing/registration in Florida	- <sub>4.</sub> -		Document number
5. (a)	LEGALING CORPORATE SERVICES INC.			
``	Registered Agent and Registered Office shown on the records of 5237 SUMMERLIN COMMONS BLVD STE		Dept. of Stat	 e:
	Registered Office Address (MUST BE FLORIDA STREET)			
				<b>19 19</b>
	FORT MYERS , FL	33907		19 HAY
(b)	ROCKET LAWYER CORPORATE SERVICE	ES LLÇ		VI
	Enter name of NEW Registered Agent and/or NEW Registered	Office addr	<u> 678</u> :	
	155 OFFICE PLAZA DRIVE, 1ST FLOOR			8. <b>4.</b> 4. <b>5.</b> 4. <b>5.</b>
	NEW Registered Office Address:	-		•
			<del></del> -	•
	TALLAHASSEE , FL	32301		
agent v	imited liability company is not organized under the law inge or changes are made, the Florida street address of 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	the register bility comes f the limited limited liab	ered office pany, it is ed liability bility com	and the business office of the registered thereby confirmed that the change(s) company or as otherwise provided in pany.
Signa	person a member or authorized representative of a member	JESSI	CA SCHO	DLL, AUTHORIZED REPRESENTATIVE
I horo	/ hy accent the appointment as registered agent and a		. 47	Printed or typed name of signee
he obl	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I had in priting of this change.	ee to act in performan for in Ch ereby conj	i this cape ce of my c apter 605, firm that t	icity. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been
Signatu	re of Registered Agent			

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25,00