U15000099714

| (Req | uestor's Name) | |
|---------------------------|-------------------|-------------|
| (Add | lress) | |
| (Add | lress) | |
| (City | //State/Zip/Phone | e #) |
| PICK-UP | WAIT | MAIL |
| (Bus | siness Entity Nar | ne) |
| (Doc | cument Number) | |
| Certified Copies | Certificates | s of Status |
| Special Instructions to F | | |
| | | |
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| | | |

Office Use Only



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2024 JUN 18 AM 9: 14

2024 JUN 18 AMII:

RECEIVED

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

CONTACT PERSON: Amanda Miller -- EXT#

| ACCOUNT NO. : I2000000195 | |
|---|----------|
| REFERENCE : 471241 7596800 | |
| AUTHORIZATION CONTRACTOR | |
| COST LIMIT : \$ 25.00 | |
| ORDER DATE : May 16, 2024 | 2024 JUH |
| ORDER TIME : 2:18 PM | |
| ORDER NO. : 471241-246 | 18 AH |
| CUSTOMER NO: 7596800 | ي و |
| CHANGE OF AGENT | |
| NAME: TERRA 2850 MARY INVESTMENTS, 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.

| l. Na | ame of the limited liability company: | MARY INVI | ESTMENT | S, LLC | |
|---|--|--|---|--|---|
| 2. (a) | | (b |) | | |
| (, . | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | | |
| | 3310 MARY STREET, SUITE 302 | | 3109 GR | AND AVENUE | E, #349 |
| | COCONUT GROVE, FL 33133 | | COCONU | JT GROVE, FL | _ 33133 |
| | 06/09/2015 | | L1500009 | 99714 | |
| 3. | Date of tiling/registration in Florida | 4. | | Document nur | mber |
| 5. (a) | | | | | |
| J. (a) | Registered Agent and Registered Office shown on the records NRAI SERVICES, INC. | of the Florida | Dept. of Stat | te: | |
| | Registered Office Address (MUST BE FLORIDA STREE | ET ADDRESS) | | _ | 2024 |
| | PLANTATION | FL 33324 | | _ | 2024 JUN 18 |
| (b) | Enter name of NEW Registered Agent and/or NEW Register Corporation Service Company | | ress: | - | |
| | NEW Registered Office Address: | | | _ | |
| | 1201 Hays Street | | | _ | |
| | Tallahassee | 32301 FL | | _ | |
| change agent v was/wo the arti | imited liability company is not organized under the lor changes are made, the Florida street address of twill 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 control | he registered liability con s of the limi | l office an opany, it is ted liabilit | d the business of the business | office of the registered med that the change(s) |
| | cure of a member or authorized representative of a member | JILL | CILMI, AU | ITHORIZED PE | ERSON |
| Signat | ture of a member or authorized representative of a member | | | Printed or typed | name of signee |
| попунес | by accept the appointment as registered agent and a ons of all statutes relative to the proper and comple- igations of my position as registered agent as provic ly reflect a change in the registered office address, I in writing of this change. | gree to act i te performat ded for in Ci I hereby cor | n this cape ice of my e apter 605 ifirm that i | acity. I further duties, and I an i, F.S. Or, if th the limited liab | agree to comply with the m familiar with and accepts document is being filed billity company has been |
| Signatu | Llace C-Kuble re of Registered Agent | GRACE E | KIRBY, | ASST. VICE P | PRESIDENT |