

L15 000154106

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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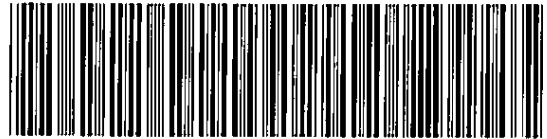
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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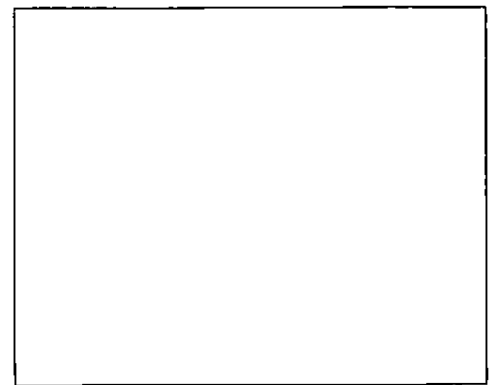
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OCT 23 2017
J. HARRIS

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OCT 20 2017 OCT 20 AM 9:06
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FLORIDA RESEARCH & FILING SERVICES, INC.
1211 CIRCLE DRIVE
TALLAHASSEE, FL 32301
PHONE (850)524-4381



OFFICE USE ONLY

WALK-IN

ENTITY NAME:

240 CRANDON INVESTMENTS, LLC

CH# 7772 FOR \$55.00

PLEASE FILE THE ATTACHED CHANGE OF AGENT & RETURN THE
FOLLOWING:

XXX CERTIFIED COPY

___ STAMPED COPY

___ CERTIFICATE OF STATUS

Examiner's Initials

**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. Name of the limited liability company: 240 Crandon Investments, LLC

2. (a) <u>Principal office address of limited liability company:</u> <i>(Note: MUST BE STREET ADDRESS)</i> <u>240 Crandon Blvd. Ste. 260</u> <u>Key Biscayne, FL 33149</u>	(b) <u>Mailing address of limited liability company:</u> <i>(Note: MAY BE POST OFFICE BOX)</i> <u>240 Crandon Blvd. Ste. 260</u> <u>Key Biscayne, FL 33149</u>
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3. <u>September 15, 2015</u> Date of filing/registration in Florida	4. <u>L15000154106</u> Document number
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5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
AGI REGISTERED AGENTS, INC.

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
1000 Brickell Ave. Ste. 300
Miami, FL 33145

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

ATRIUM REGISTERED AGENTS, INC.
NEW Registered Office Address:
8950 SW 74th Court, Ste. 1901
Miami, FL 33156

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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

By: <u>Claudia M. Corbo, Manager</u> Signature of a member or authorized representative of a member	240 Management Services, LLC Printed or typed name of signee
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I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Atrium Registered Agents, Inc.
Signature of Registered Agent By Felipe Frias, VP
Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00