16000012368

<u></u>						
(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



200374551832

791 CT 25 MH 10: 25

2021 OCT 26 PH 3: 49

Y SULKER OCT 27 2021

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

ACCOUNT NO. : I2000000195						
REFERENCE : 159856 7779145						
AUTHORIZATION: Spelle Bear						
COST LIMIT : \$\frac{1}{2}5.00						
ORDER DATE: October 22, 2021						
ORDER TIME : 2:04 PM						
ORDER NO. : 159856-002						
CUSTOMER NO: 7779145						
CHANGE OF AGENT						
NAME: 5225 PASEO, LLC						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY XX PLAIN STAMPED COPY						
COMMA COM DEDICON. Extient Dalen Dalen Dam						
CONTACT PERSON: Eyliena Baker 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. Na	nme of the limited liability company: 5225 PASEO, L	LC		
2. (a)	2020 Salzedo Street, 5th Floor	(b	2020 S	alzedo Street, 5th Floor
(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(°	, <u> </u>	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	CORAL GABLES, FL 33134	_ -	CORAL	GABLES, FL 33134
	01/21/2016		L160000	12368
3. 5. (a)	Date of filing/registration in Florida ROMERO, RAFAEL	4.	·	Document number
,	Registered Agent and Registered Office shown on the records of 2020 Salzedo Street, 5th Floor	the Florida	Dept. of St	ate:
	Registered Office Address (MUST BE FLORIDA STREET)	<u> ADDRESS</u>	7	
	CORAL GABLES . FL	33134		- 227 - 277
(b)	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company	Office ad	dress:	26 MM IO: 25
	NEW Registered Office Address:			——————————————————————————————————————
	1201 Hays Street			_
	Tallahassee, FL	32301		_
change agent v was/we	imited liability company is not organized under the lay or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liagree authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registere ability co of the lim	d office a mpany, it ited liabil	nd the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in
	are of a member or authorized representative of a member	Jill (Cilmi, Auth	norized Person
l herel provisi he obli o mere totified	by accept the appointment as registered agent and agrous of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I firm writing of this change.	ee to act performa I for in C vereby co	in this cap ince of my hapter 60 onfirm that	Printed or typed name of signee pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
	Orace L-Kuby re of Registered Agent			
	Kirby, Asst. Vice President of Corporation Service Company			