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COVER LETTER

TO: Registration Section

Divi	sion of Corporations				
CUBICAT	CORRECT DEVELOPMENT LLC Name of Limited Liability Company				
SUBJECT:					
Dear Sir or M	Madam:				
The enclosed	d Registered Agent/Registered Off	ice Change and fe	ee(s) are submitted for filing.		
Please return	all correspondence concerning th	is matter to the fo	llowing:		
Laurence	S. Donahue, Esq.				
	Name of Person		-		
Law 4 Sm	all Business, P.C.				
	Firm/Company		-		
320 Gold /	Ave SW, STE 620				
	Address		-		
Albuquerq	ue, NM 87102				
	City/State and Zip Code		-		
FILINGS@	DL4SB.COM				
E-mail	address: (to be used for future ann	ual report notifica	ation)		
For further in	nformation concerning this matter,	please call:			
Angela Mii	nefee	505	715 - 5700		
	Name of Person	_ \	Area Code & Daytime Telephone Number		
Regi Divi Clift 2661	REET/COURIER ADDRESS: istration Section sion of Corporations on Building Executive Center Circle ahassee, Florida 32301	Regi: Divis P.O.	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Encl	losed is a check for the following	amount:			
☑ \$2	25 Filing Fee	□ \$55	Filing Fee & Certified Copy		
INHS18 (2/14	1)				

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.

. Na	me of the limited liability company: CORRE	CT DEVELOPME	ENT LLC
. (a)	50 N. LAURA STREET	(b) 50	N. LAURA STREET
,,,	Principal office address of limited liability compar (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	SUITE 2500	SU	JITE 2500
	JACKSONVILLE, FL 32202	JAG	CKSONVILLE, FL 32202
	04/06/2016	L160	000067968
	Date of filing/registration in Florida	4.	Document number
(a)	ERNESTO PONCE, JR.		
(/	Registered Agent and Registered Office shown on the reco	ords of the Florida Dept.	
	1351 NE MIAMI GARDENS DRIVE		19 J
	Registered Office Address (MUST BE FLORIDA ST	REET ADDRESS)	
	813E	. <u></u>	
	MIAMI	_, FL_32202	TANK OF ALL MANAGEMENT OF THE PROPERTY OF THE
(b)	REGISTERED AGENTS, INC.		PERSONAL PROPERTY OF THE PROPE
	Enter name of NEW Registered Agent and/or NEW Reg	istered Office address:	
	7901 4th St N		
	NEW Registered Office Address:		
	STE 300		
			

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.

Signature of a member or authorized representative of a member

Laurence S. Donahue, Esq., Attorney-In-Fact

Printed or typed name of signee

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.

Psec Hame

Bill Havre - Assistant Secretary

Signature of Registered Agent