## \_16000 165443

(F	Requestor's Name)		
	Address)		
\ <u>'</u>			
(Address)			
(	City/State/Zip/Phone #)	<u> </u>	
	, , ,		
PICK-UP	WAIT	MAIL	
(E	Business Entity Name)		
(£	Document Number)		
Certified Copies	Certificates of	Status	
<del></del>			
Special Instructions to F	iling Officer:		
<u> </u>			

Office Use Only



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2022 HOV 30 PH 4: 37

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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195					
REFERENCE : 120479 8388342					
AUTHORIZATION :					
COST LIMIT : \$ 25.00					
ORDER DATE: November 8, 2022  ORDER TIME: 2:08 PM					
ORDER NO. : 120479-001					
CUSTOMER NO: 8388342					
CHANGE OF AGENT					
NAME: 330 NAPLES LLC					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY  XX PLAIN STAMPED COPY					
CONTACT PERSON: Alexxis Weiland 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. N	lame of the limited liability company: 330 NAPLES	LLC		
			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)
	633 9TH STREET N. SUITE 301		340	9TH STREET N. PMB
	NAPLES, FL 34102		NA	PLES, FL 34102
	09/07/2016		L160	000165443
3.	Date of filing/registration in Florida	4.		Document number
5. (a)				
* * (**,	Registered Agent and Registered Office shown on the records of	of the Florid	a Dept	of State;
	CORPORATION SERVICE COMPANY			~~~
	Registered Office Address (MUST BE FLORIDA STREET  1201 HAYS STREET	T ADDRES.	<u>2)</u>	2022 NOV 30
	TALLAHASSEE	32301	 -2525	30
	TALLAHASSEE	I		
(b)				S = :
,-,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ed Office ac	<u>idress</u> :	FII 1: 37
	LEGALINC CORPORATE SERVICES INC.			
	NEW Registered Office Address:			<del></del>
	5237 SUMMERLIN COMMONS BLVD SUITE 400			
	FORT MYER, F	L_33907		
change agent was/w the art	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited latere authorized by an affirmative vote of the members icles of organization or the operating agreement of the company of a member or authorized representative of a member	ne register liability co of the lim e limited l	ed off ompan nited l liabilit	ice and the business office of the registered by, it is hereby confirmed that the change(s) iability company or as otherwise provided in
1 hara	thy accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, leading writing of this abayase.	gree to act e perform ed for in ( hereby co	' in thi ance ( Thapti onfirn	is composite. I further carrie to comple with the

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

rik Treutlein