Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000179026 3)))



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| To:   |  |
|-------|--|
| 10.   | Division of Corporations   |
|       | Fax Number : (850)617-6383   |
|       | . (0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,  |
| From: |  |
|       | Account Name : CORPORATE CREATIONS INTERNATIONAL INC.  |
|       | Account Number : 110432003053  |
|       | Phone : (561)694-8107  |
|       | Fax Number : (561)694-1639   |
|       | email address for this business entity to be used for future report mailings. Enter only one email address please.** |

JUN 12 PM 3:

## LLC REGISTERED AGENT CHANGE 235 VIA VIZCAYA LLC

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 0       |
| Page Count            | 02      |
| Estimated Charge      | \$25.00 |

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JUN 15 2020

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## H20000179026

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY 2020 JULY 12 AFF 8: 4,8

| 1. The name of the limited liability company is:  | 235 Via Vizcaya LLC  |
|---|--|
| 2. (a) Principal office address of the limited liability com  | npany: 2505 METROCENTRE BLVD, STE 301  |
| (Note: MUST BE STREET ADDRESS)  | WEST PALM BEACH FL 33407   |
| (b) Mailing address of limited liability company:   | 2505 METROCENTRE BLVD, STE 301   |
| (Note: MAY BE POST OFFICE BOX)  | WEST PALM BEACH 33407  |
| 12/14/2016  | L16000226055   |
| 3. Date of filing/registration in Florida   | 4. Document number   |
| 5.(a) Registered Agent and Registered Office sh   | hown on the records of the Florida Dept. of State:   |
| Registered Agent:   | ARON, JERRY E, PA  |
| Registered Office Address:  | 2505 METROCENTRE BL.VD. STE 301  |
|   | WEST PALM BEACH FL 33407   |
| (b) Enter name of NEW Registered Agent and/or N   | VEW Registered Office address:   |
| NEW Registered Agent:   | Corporate Creations Network Inc.   |
| NEW Registered Office Address:  | 801 US Highway 1   |
| (MUST BE FLORIDA STREET ADDRES  | <u>S)</u>  |
|   | North Palm Beach FL 33408  |
| or changes are made, the Florida street address of the regidentical. Or, in the case of a Florida limited liability co an affirmative vote of the members of the limited liability the operating agreement of the limited liability company |  |
| (Signature of a member or authorized representative of a mem  | ber)   |
| Courtney Nanke, Attorney-in-Fact<br>(Printed or Typed name of signee)   | <del></del>  |
| of all statutes relative to the proper and complete perfor<br>my position as registered agent as provided for in Chap-  | l agree to act in this capacity. I further agree to comply with the provision mance of my duties, and I am familiar with and accept the obligations of ter 605, F.S. Or, if this document is being filed to merely reflect a change elimited liability company has been notified in writing of this change.  Special Secretary |
| Division of Corporations, l   | P.O. Box 6327, Tallahassee, FL 32314   |
| INHS18(10/99)   |  |
| Corporate Creations International   |  |
| 801 US Highway 1  |  |

(561) 694-8107

North Palm Beach FL 33408