

L16000233801

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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.

(((H21000265284 3)))



H210002652843ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : M. BURR KEIM COMPANY

Account Number : I19990000242

Phone : (215)563-8113

Fax Number : (215)977-9386

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

21 JUL -9 AM 9:32

RECEIVED

2021 JUL -9 PM 1:53

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

**LLC REGISTERED AGENT CHANGE
FV LADY ROSLYN, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

884

(((H21000265284 3)))

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: FV LADY ROSLYN, LLC

2. (a) 985 Ocean Drive (b) 985 Ocean Drive

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)(Note: **MAY BE POST OFFICE BOX**)Cape May, NJ 08204Cape May, NJ 0820412/31/2016L16000233801

3. Date of filing/registration in Florida

4. Document number

5. (a) W. Bradley Munroe, Esq.

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

239 E. Virginia StreetRegistered Office Address **(MUST BE FLORIDA STREET ADDRESS)**Tallahassee, FL 32301(b) Registered Agents Inc.Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:7901 4th St N**NEW** Registered Office Address:STE 300St. Petersburg, FL 33702

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
21 JUL -9 AM 9:32

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.

Barry Cohen
Signature of a member or authorized representative of a member

Barry Cohen

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.

Bill Havre
Signature of Registered Agent

Bill Havre - Assistant Secretary

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00

(((H21000265284 3)))