## 000011154

(Reque	stor's Name)			
(Addres	ss)			
(Addres	ss)			
(City/St	ate/Zip/Phone #)			
PICK-UP	WAIT MAIL			
(Busine	ess Entity Name)			
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filin	g Officer:			

Office Use Only



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2022 APR - 1 AH 11: 32

CORPORATION SERVICE COMPANY

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

ACCOUNT NO.	: I2000000195						
REFERENCE	: 583464 8373818						
AUTHORIZATION	Spell de man						
COST LIMIT	: \$25.00						
ORDER DATE : March 31, 2022							
ORDER TIME : 2:36 PM							
ORDER NO. : 583464-010							
CUSTOMER NO: 8373818							
	• • • • • • • • • • • • • • • • • • • •						
CHANGE OF AGENT							
NAME: BRUNFELSIA NINE - ULT LLC							
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							
CERTIFIED COPY							
XX PLAIN STAMPED COPY							
CONTACT PERSON: Alexxis Weilan	nd EXT#						
CONTACT PERSON: Alexxis Weilar	ıd 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	me of the limited liability company:  BRUNFELSIA	NINE - I	UL	LTLLC	
2. (	a)			(h	b)	
2. (	,	Principal office address of limited liability company; (Note: MUST BE STREET ADDRESS)		(0	Mailing address of limited liability of (Note: MAY BE POST OFFICE	
		701 BRICKELL AVE., STE. 2100			701 BRICKELL AVE., STE. 2100	
		MIAMI, FL 33131			MIAMI, FL 33131	
		01/18/2017		1	L17000011154	
3.		Date of filing/registration in Florida	4.	•	Document number	
5. (	'a					
J. (	(a)	Registered Agent and Registered Office shown on the records of	the Flori	ida	a Dept. of State:	
		CORPORATE CREATIONS NETWORK, INC.			: 70	
		Registered Office Address (MUST BE FLORIDA STREET	<u>s</u> 22 t	٠		
		801 US HIGHWAY 1			1072 APR - I	•
		NORTH PALM BEACH . FI	33408	3		
		<del>-</del>	-			
(	b)					
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office :	add	ldress: GA	
		Corporation Service Company				
		NEW Registered Office Address:			<del></del>	
		1201 Hays Street				
		Tallahassee	32301			
		FI	·			
char ager was/	ige it w we	mited liability company is not organized under the lator changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liter authorized by an affirmative vote of the members of the organization or the operating agreement of the	registe ability of of the li limited	rec cor mi l lis	ed office and the business office of the re- ompany, it is hereby confirmed that the ch nited liability company or as otherwise pro- liability company.	gistered ange(s)
	75/Suntingo Onon				ntiago Ulloa - Manager	
I he prove the common to motify	reh isio bli ere fied	ure of a member or authorized representative of a member by accept the appointment as registered agent and age ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ily reflect a change in the registered office address. It in writing of this change.  Accepted Registered Agent E. Kirby, Asst. Vice President	ree to a perfori d for in hereby	ct i na Ci coi	Printed or typed name of signee to in this capacity. I further agree to comp ance of my duties, and I am familiar with Chapter 605, F.S. Or, if this document is onfirm that the limited liability company I	ly with the and accept being filed as been