11700038986

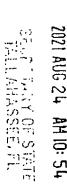
<u> </u>				
(Requestor's Name)				
(Address)				
(·/				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
,				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
opecial manuellons to timing officer.				

Office Use Only



800371276878

08/24/21--01023--009 *+425.00



FILED



COVER LETTER

TO: Registration Section Division of Corporations						
6720 CANARY PALM CIR. LLC SUBJECT:						
Name of Limited Liability Company						
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office Change	and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to	the following:					
Eric Salpeter						
Name of Person						
Salpeter Gitkin, LLP						
Firm/Company						
3864 Sheridan Street						
Address						
Hollywood, FL 33021						
City/State and Zip Code						
jessica@salpetergitkin.com						
E-mail address: (to be used for future annual report	notification)					
For further information concerning this matter, please cal	l:					
Eric Salpeter 954	467-8622					
Name of Person	Area Code & Daytime Telephone Number					
Mailing Address: Registration Section Division of Corporations P.O. Box 6327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810					
Tallahassee, FL 32314	Tallahassee, FL 32303					

☐ \$55 Filing Fee & Certified Copy

Enclosed is a check for the following amount:

■ \$25 Filing Fee

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	ame of the limited liability company: 6720 CANARY PA	ALM C	IR, LLC		
2. (a)	6720 Canary Palm Cir	ſ	11419 W Palmetto Park Rd		
z. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(#970932	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Boca Raton, FL 33433	-	Boca Rat	on, FL 33497	
	02/17/2017		L1700003	8986	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	UNITED STATES CORPORATION AGENTS, INC.				
J. (n)	Registered Agent and Registered Office shown on the records of the 5575 S. Semoran Blvd.	ne Florid	a Dept. of St	nte:	
	Registered Office Address (MUST BE FLORIDA STREET A				
	Suite 36			21 A	
	Orlando FL ³	32822		FIL 2021 AUG 24 SEGRETAR CARAS	
(b)	Salpeter Gitkin, LLP Enter name of NEW Registered Agent and/or NEW Registered C	Office ar	1dress:	MID: 54	
	3864 Sheridan Street	×			
	NEW Registered Office Address:			- % 	
	Hollywood FL 3	3021			
change agent was was was the artification of the control of the co	imited liability company is not organized under the laws or changes are made, the Florida street address of the revill-be identical. Oh, in the case of a Florida limited liabere authorized by an affirmative vote of the members of cless of organization of the operating agreement of the liabere of a member	egister oility co the lin mited	ed office arompany, it nited liability con	and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in impany. One of the complete of the registered in impany. Printed or typed name of signee	