

(Requestor's Name)						
	(Addross)					
(Address)						
(Address)						
	(
	(City/State/Zip/Phone #)					
PICK-UP	WAIT MAIL					
	(Business Entity Name)					
	(Document Number)					
	(bocament Hamber)					
Certified Copies	Certificates of Status					
,						
Special Instructions to	Filing Officer					
Special Instructions to Filing Officer:						

Office Use Only





CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195						
REFERENCE : 583464 8373818						
AUTHORIZATION STUBBLE MAN						
COST LIMIT : \$ 25.00						
ORDER DATE: March 31, 2022						
ORDER TIME : 3:32 PM						
ORDER NO. : 583464-016						
CUSTOMER NO: 8373818						
CHANGE OF AGENT						
NAME: BRUNFELSIA TEN - RIVER 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. 1	Name of the limited liability company: BRUNFELSIA	TEN - RI\	/ER LLC	
2. (a)	(F	o)	
2. (a	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			failing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	701 BRICKELL AVENUE, STE 2100		701 BRICI	KELL AVENUE, STE 2100
	MIAMI, FL 33131		MIAMI, FL	33131
	03/20/2017		L17000061	800
3.	Date of filing/registration in Florida	— 4.		Document number
5. (a	a)			
J. (Registered Agent and Registered Office shown on the records CORPORATE CREATIONS NETWORK, INC.	of the Florida	Dept, of State	:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 801 US HIGHWAY 1			202
	NORTH PALM BEACH	33408	·-·	0022 / FER
	· · · · · · · · · · · · · · · · · · ·	1 1.,		1
(b)			127
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	red Office ad	dress:	
	Corporation Service Company			<u></u> 9
	NEW Registered Office Address:			
	1201 Hays Street			
	Tallahassee	FL32301		
chang agent was/v	limited liability company is not organized under the lage or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members rticles of organization or the operating agreement of the	he registere liability co s of the lim	ed office and mpany, it is ited liability	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
<u>/s/</u>	/s/Santiago Ulloa		Santiago Ulloa - Manager	
_	nature of a member or authorized representative of a member			Printed or typed name of signee
provi the oi to me	weby accept the appointment as registered agent and a sions of all statutes relative to the proper and complet bligations of my position as registered agent as provide the reflect a change in the registered office address, and in writing of this change.	te pertorma	mce of my d	uties, and I am familiar with and accept.
Signa	ture of Registered Agent			
	ce E. Kirby, Asst. Vice President			

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