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COVER LETTER

	Registration Section Division of Corporations							
SUBJE	T: CORTEZ PLAZA 84, LLC Name of Limited Liability Company							
.,								
Dear Sir	or Madam:							
The encl	losed Registered Agent/Registered Offic	ce Change	and f	fee(s) are submitted for filing.				
Please re	eturn all correspondence concerning this	s matter to	the f	following:				
GEOR	GE ULLRICH							
	Name of Person			_				
CREA ⁻	TIVE REALTY PARTNERS							
	Firm/Company			-				
9465 V	VILSHIRE BLVD., THIRD FLOOF	₹						
	Address							
BEVER	RLY HILLS CA 90212							
	City/State and Zip Code			_				
	GE@CREATIVEREALTYPARTN							
E-1	mail address: (to be used for future annu	ial report i	notific	cation)				
For furth	ner information concerning this matter, p	please call						
GEOR	GE ULLRICH	714 _ at (267-6132 _)				
	Name of Person			Area Code & Daytime Telephone Number				
Registration Section Red Division of Corporations Di Clifton Building P.			Reg Divi P.O.	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
1								
İ	2 \$25 Filing Fee	E	\$55	5 Filing Fee & Certified Copy				
15111010	(21)							

INHS18 (2/14)

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.

t.	Na	me of the limited liability company: CORTEZ PLAZ	ZA 84	4, L	LC	
2. (CORTEZ PLAZA 84 C/O CREATIVE REALTY		(b) _	CORTE	Z PLAZA 84 C/O CREATIVE REA
'	(41)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	- '	(0)_	Ν	failing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		9465 WILSHIRE BLVD., THIRD FLOOR		ç	9465 WII	LSHIRE BLVD., THIRD FLOOR
		BEVERLY HILLS CA 90212	- -	<u> </u>	BEVERL	Y HILLS CA 90212
		03/29/2017		L	1700007	1375
3.		Date of filing/registration in Florida	4.	_		Document number
5.	(a)	MOSES, MICHAEL				
J.	(4)	Registered Agent and Registered Office shown on the records of the	e Flori	da D	ept. of State	:
		MICHAELSON REAL ESTATE GROUP				
		Registered Office Address (MUST BE FLORIDA STREET AD 12443 SAN JOSE BLVD., SUITE #604	TILI 2019 DCT 30 TACLARIASS			
		JACKSONVILLE FL.3	2223	3		TILED PRIASEE, FI
·. . ((b)	RON WENZEL				mg 3 M
		Enter name of NEW Registered Agent and/or NEW Registered Office address:			<u>:55</u> :	2: 05 STATE FLORID
		GRAIL MANAGEMENT GROUP				NOA TE
		NEW Registered Office Address:				
		676 CHERRY STREET, SUITE #2				
		WINTER PARK FL3	2789	9		
the age was	cha nt w /we	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited liability authorized by an affirmative vote of the members of cles of organization or the operating agreement of the limited liability.	ie reg ility (the li mited	giste com mite Hial	red office pany, it is ed liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.
Ši	gnat	ure of a member or authorized representative of a member			-	Printed or typed name of signee
pro the to n	visio obli iere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete point of my position as registered agent as provided juve the proper and complete point of the proper and complete point of the proper and complete point of the provided juve the proper and complete and provided in writing of this change.	e to a erfori for in reby	ct in man Che conj	this capa ce of my a apter 605, firm that t	city. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been
Sign	natur	e of Registered Agent				
		Division of Corporations P.O. Bo FILING FEI				see, FL 32314