## L11000136508

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
C DICK HD C MAIT C MAII
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to rining Officer.

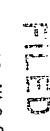
Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195								
REFERENCE : 156646 8396831								
AUTHORIZATION: Lyncholeman								
COST LIMIT : \$ 25.00								
ORDER DATE : November 23, 2022								
ORDER TIME : 2:14 PM								
ORDER NO. : 156646-040								
CUSTOMER NO: 8396831								
***************************************								
CHANGE OF AGENT								
NAME. MACANELL COO MANACEMENTE DEST								
NAMÉ: MASAVEU & CO MANAGEMENT REAL ESTATE US LLC								
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:								
CERTIFIED COPY								
XX PLAIN STAMPED COPY								

EXAMINER:

CONTACT PERSON: Eyliena Baker -- EXT#

## 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.

I. Na	nme of the limited liability company:	MASAVEU & C	O MANA	AGEMENT	REAL ESTATE (	JS LLC			
(,	Principal office address of limited li (Note: MUST BE STREET)	ability company:	`		Mailing address of	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BON)  KELL KEY DRIVE SUITE 101			
	601 BRICKELL KEY DRIVE SUITE	101		601 BRI	CKELL KEY DRI				
	MIAMI, FL 33131		<del></del>	MIAMI, FL 33131					
	06/22/2017	L17000136508							
3.	Date of filing/registration in	ı Florida	4.		Document num	iber			
5. (a)									
). (a)	Registered Agent and Registered Office sho	wn on the records of	the Florid	la Dept. of St	inte:				
	Masaveu & CO Management Real					15	20		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				<del></del>	ĮΑĮ	2022 DEC	MET STEP	
	601 Brickell Key Dr 101					≒; ≯÷	<u> </u>	# P	
	Miami	. Fl	33131		<del></del>	LI AHASSEE EL	12		
						SS.	F		
(b)					_		9: 20	*2-10 <sup>8</sup>	
	Enter name of NEW Registered Agent and	or <u>NEW Registered</u>	Office at	ddress:		, .	Õ		
	Corporation Service Company								
	NEW Registered Office Address:				_				
	1201 Hays Street				_				
	Tallahassee	TO!	32301						
change agent w was/we the arti	mited liability company is not organ or changes are made, the Florida strevill be identical. Or, in the case of a lare authorized by an affirmative vote cles of organization or the operating S/JILL CILMI	ized under the lave eet address of the Florida limited lia of the members of agreement of the	ws of the register ability co of the lin limited	ed office a ompany, it nited liabili liability co	nd the business o is hereby confirm ty company or as mpany. UTHORIZED PE	ffice of the ned that the s otherwise RSON	e registe e chang e provic	ered e(s)	
_	ure of a member or authorized representative				Printed or typed n	-			
I herek provisio the obli to mere notified	oy accept the appointment as register ons of all statules relative to the propigations of my position as registered by reflect a change in the registered in writing of this change	ed agent and agr per and complete agent as provided office address, 11	ee to ac. perform d for in ( hereby c	t in this cap ance of my Chapter 60 onfirm that	pacity. I further a duties, and I am 5, F.S. Or, if this the limited liabi	agree to co familiar v s documen lity compa	omply with and t is bein ny has	ith the accept ig filed been	
Signatur	e of Registered Agent		GRACI	E.E. KIRBY	Y. ASST. VICE I	PRESIDE	VΤ		