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Account#: I20000000088
For any issues please contact
Cheyanne Davis
(850) 202-1882

Date:	08/07/2024	Cheyanne Davis (850) 202-1882				
	Cheyanne Davis	<u> </u>				
Reference #:	2407135					
Entity Name:	OBOS KEI	NNEDY POINT, LLC				
☐ Article	es of Incorporation/Authorization	on to Transact Business				
☐ Amen	dment					
✓ Change of Agent						
Reins	tatement					
Conversion						
☐ Merge	er					
☐ Disso	lution/Withdrawal					
Fictition	ous Name					
Other						
Authorized A	mount: \$25.00					
Signature: _	Chayung taka					

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.

Name of the limited liability company:			OBOS KENNEDY POINT, LLC		
2. (a)		((b)		
- ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		1	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	No Change			No Change	
		_			
	10/16/2017	_		L17000214151	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	Oliver, Kent A				
J. (4)	Registered Agent and Registered Office shown on the records of	the Flori	da Dept. of Stat	- c:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
	4749 S Washington Ave			_	
	Titusville , FI.		32780	-	
(b)	Cogency Global Inc.				
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office a	iddress:	-	
	115 North Calhoun Street, Suite	4			
	NEW Registered Office Address:		<u> </u>	.	
				, -	
	Tallahassee , FL		32301		
the chagent was/w	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li- tere authorized by an affirmative vote of the members of cicles of organization or the operating agreement of the	ws of the the regability of the li	gistered office company, it i mited liabilit	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in	
/s/ Kent Oliver				Kent Oliver	
Signa	ature of a member or authorized representative of a member			Printed or typed name of signee	
provis the ob to mer	thy accept the appointment as registered agent and agi ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address, I ded in writing of this change.	ree to a perfor d for in hereby	ct in this cap mance of my Chapter 60: confirm that	acity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been	

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

/s/ Michael Carlisle

Signature of Registered Agent Michael Carlisle, Assistant Secretary