

Division of Corporations

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**Florida Department of State  
Division of Corporations  
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**To:**

Division of Corporations  
Fax Number : (850)617-6383

**From:**

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.  
Account Number : 110432003053  
Phone : (561)694-8107  
Fax Number : (561)694-1639

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

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**LLC REGISTERED AGENT CHANGE  
MB80, LLC**

Certificate of Status	0
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Page Count	02
Estimated Charge	\$25.00

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# 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. Name of the limited liability company: <u>MB80, LLC</u>	
2. (a) <u>8950 SW 74TH CT</u>	(b) <u>8950 SW 74TH CT</u>
Principal office address of limited liability company: (Note: <u>MUST BE STREET ADDRESS</u> )	Mailing address of limited liability company: (Note: <u>MAY BE POST OFFICE BOX</u> )
<u>STE # 2201 A17</u>	<u>STE # 2201 A17</u>
<u>MIAMI, FL 33156</u>	<u>MIAMI, FL 33156</u>
<u>10/19/2017</u>	<u>LT7000216501</u>
3. Date of filing/registration in Florida	4. Document number
5. (a) <u>ESTRADA, JAVIER</u>	
Registered Agent and Registered Office shown on the records of the Florida Dept. of State: <u>8950 SW 74TH CT STE # 2201 A17</u>	
Registered Office Address <u>(MUST BE FLORIDA STREET ADDRESS)</u> <u>STE # 2201 A017</u>	
<u>MIAMI</u> , FL <u>33156</u>	
(b) <u>Jacquin P. Gilchrist, Esq.</u>	
Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :	
<u>The Gilchrist Law Firm, P.A.</u>	
<u>NEW Registered Office Address:</u> <u>2525 Ponce de Leon Boulevard, Suite 300</u>	
<u>Coral Gables</u> , FL <u>33134</u>	

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Danielle Gossman, Attorney-in-Fact

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent:

Danielle Gossman, Special Secretary

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

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