L17000260288

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
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20 JAN -3 AM 8: 19





CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

20 Jan - 3 Ag 8: 1c

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Baronie lindsey.baronie@cscglobal.com

Date: December 31, 2019

Order#: 110742/033

Re: S-212 PARTNERS, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX __ Check in the amount of \$25.00.

Please take the following action:

XX ___ File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Lindsey Baronie c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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.	Na	me of the limited liability company: S-212 PARTNER	S, LLC			
2	(a)	301 E Las Olas Blvd	(b)	301 E Las Olas Blvd		
	(u) .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0,	Mailir	ng address of limited li tte: MAY BE POST C	
		Ft. Lauderdale FL 33301 December 21, 2017		Ft. Lauderdale, FL 33301 L17000260288		
3.		Date of filing/registration in Florida	4.	Doc	ument number	20 JAH -
5.	(a)	FRANK, WEINBERG & BLACK, P.L.				- E
	()	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
		7805 SW 6th Court				王 司司
		Registered Office Address (MUST BE FLORIDA STREET AL	DDRESS.	1		8
						19
		Plantation , FL_	33324			
	(b)	Corporation Service Company				
		Enter name of NEW Registered Agent and/or NEW Registered C	Office ado	<u>lress</u> :		
		1201 Hays Street				
		NEW Registered Office Address:				
				_		
		Tallahassee, FL_	32301			
the ag- wa	cha ent v is/we	imited liability company is not organized under the law- inge or changes are made, the Florida street address of t vill be identical. Or, in the case of a Florida limited liab- ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	he regis pility co the lim	tered office and mpany, it is her ited liability con	I the business office by confirmed that mpany or as other	ce of the registered the the change(s)
		Xie & Comi	Jill C	Cilmi, Authorized		
- :	Signal	ture of a member or authorized representative of a member		Prin	ited or typed name of:	signee
pro the to no	ovisi e obl mere tified	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ly reflect a change in the registered office address, I he I in writing of this change.	e to act performe for in C ereby co	in this capacity unce of my dutie Chapter 605, F.S onfirm that the l	v. I further agree i es, and I am famili S. Or, if this docu imited liability co	to comply with the ar with and accept ment is being filed mpany has been
Si	gnatu	re of Registered Agent Corporation Service Company	BY: Li	ndsey M. Baro	onie, Asst. Vice	President