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LLC REGISTERED AGENT CHANGE NAVARRO LOWREY WATERFRONT, LLC

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Electronic Filing Menu

Corporate Filing Menu

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K. SALY
JUL - 6 2021

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	me of the limited liability company: NAVARRO LO	WREY	WATERFRO!	NT, LLC			
2. (a)			(b)				
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		\-, <u>-</u>	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	1641 WORTHINGTON ROAD, SUITE 330		1641 MO	RTHINGTON ROAD, SUITE 330			
	WEST PALM BEACH, FL 33409		WEST PALM BEACH, FL 33409				
	01/30/2018		L18000027	7334			
3.	Date of filing/registration in Florida	— 4.		Document number			
5. (a)							
(-,	Registered Agent and Registered Office shown on the records of CLIFFORD I. HERTZ, ESQ.	the Flori	da Dept. of Sta	ic:			
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE.	SS)	<u>_</u> ديم			
	ONE NORTH CLEMATIS STREET, SUITE 500		_	2½ E	~		
	WEST PALM BEACH	33401	 -	BELL WINSSECT FLORIDA			
			_		's \		
(b)	Enter name of NEW Registered Agent and/or NEW Registered	-			-0		
	Easter name of NEW Registered Agent and/or NEW Registere	i Office a	ulthess:	(*) <u>-</u> , ••••	<u> </u>		
				हुं इ	٠ <u>٠</u> . ح		
	NEW Registered Office Address:		·	- 3	'o'		
	360 SOUTH ROSEMARY AVENUE, SUITE 1410		_	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			
	WEST PALM BEACH, FI	33401		_			
agent www.sas/veithe articles of the self	nited liability company is not organized under the law or changes are made, the Florida street address of the ill be identical. Or, in the case of a Florida limited lia the authorized by an affirmative vote of the members of less of organization or the operating agreement of the law of all statutes relative to the proper and complete actions of my position as registered agent as provided y reflect a change in the registered office address, I have of Registered Agent	tegister bility c of the lir limited.	ompany, it is nited liabiling liability com	is the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in apany. Thus E. Www. Printed or typed name of signer.	it		

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