(Requestor's Name)					
- (Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(D)					
(Document Number)					
Certificates of Status					
Special Instructions to Filing Officer					
OCT -3 2024					
Office Use Only					



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FILED

2024 OCT -2 10410: 06 2024 OCT -2 PM 3: 46



CSC - Tallahassee CSC 1201 Hays Street

Tallahassee, FL 32301-2607 850-558-1500, Ext: x61563

To: Department Of State, Division Of Corporations

From: Shauna Godbolt - Shauna.Godbolt@cscglobal.com

Ext: x61563 Date: 10/02/24 Order #: 1636191-1

Re: HRE CAPITAL WEST MANAGER, LLC

Processing Method: Routine

## TO WHOM IT MAY CONCERN:

Enclosed please find:

Change of Registered Agent and Office

Check in the amount of: \$25.00 - FL State Account Number: I20000000195

Please take the following action:

File on a routine basis
Issue proof of filing
Return evidence to the following:
ATTN: Shauna Godbolt
c/o Corporation Service Company
251 Little Falls Drive
Wilmington, DE 19808

Special Instructions:

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

## 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. N	ame of the limited liability company: HRE CAPITAL	WEST N	1ANAGER, L	LC
2. (a)		(	b)	
,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	`	,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	2121 NW 2nd Ave 204		2121 NW	2nd Ave 204
	miami, FL 33127		miami, FL	. 33127
	03/20/2018		L1800007	2384
3.	Date of filing/registration in Florida	— 4.		Document number
5. (a)				2
J. (41,	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: MELAND RUSSIN & BUDWICK, P.A.			2024 OCT -2 121 10:06
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			3 (
	200 S. BISCAYNE BLVD SUITE 3200			T. C.
	MIAMI	33131	·	
	MIAMI, F	L		· · · · · · · · · · · · · · · · · · ·
(b)				
, ,	Enter name of NEW Registered Agent and/or NEW Registere	d Office a	ddress:	-
	Corporation Service Company			
	NEW Registered Office Address:			-
	1201 Hays Street			_
	Tallahassee	. 32301		
	Tallahassee F	[		-
chang agent was/w	limited liability company is not organized under the la e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li- tere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e register iability co of the lin	red office and ompany, it is nited liability	d the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in
181	David Moret	Da	vid Moret, M	anager
Sign	ature of a member or authorized representative of a member		· <u>-</u> .	Printed or typed name of signee
provis the ob to mei	rby accept the appointment as registered agent and ag ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	ree to ac perform d for in hereby c	t in this cape lance of my o Chapter 605 confirm that i	acity. I further agree to comply with the htties, and I am familiar with and accept , F.S. Or, if this document is being filed the limited liability company has been
Signati	Mars Tokubly ure of Registered Agent	GRAC	CE E. KIRBY	Y, ASST. VICE PRESIDENT

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