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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. Na	ame of the limited liability company: MARINA PAR	K HOLDII	NGS, LLO	<u> </u>	
2. (a)		(	h)		
2. (1)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	\	/	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	3310 Mary Street Suite 302		3109	GRAND AVENUE #349	
	Coconut Grove, FL 33133		cocc	DNUT GROVE, FL 33133	
	04/13/2018 <u>-</u>		L18000	0091933	
3.	Date of filing/registration in Florida	4.		Document number	
5 (a)					
5. (a)	Registered Agent and Registered Office shown on the records of	of the Floric	la Dept. of	State:	
	NRAI SERVICES, INC		,		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			202	
	1200 SOUTH PINE ISLAND ROAD				
	PLANTATION . F	33324		2024 JUH 18 AM 9: 4	
				3 3	
(b)				— — — — — — — — — — — — — — — — — — —	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:				
	Corporation Service Company			9	
	NEW Registered Office Address:				
	1201 Hays Street				
	Tallahassee F	32301			
change agent v was/w	imited liability company is not organized under the less or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members icless of organization or the operating agreement of the	ne register liability co of the lir e limited	ed office ompany, nited liab liability o	and the business office of the registered it is hereby confirmed that the change(s) oility company or as otherwise provided in company.	
- (3*	Jue E. Come	JIL.	L CILMI,	AUTHORIZED PERSON	
	ture of a member or authorized representative of a member			Printed or typed name of signee	
provisi the obl to merc	by accept the appointment as registered agent and agions of all statutes relative to the proper and complet igations of my position as registered agent as providely reflect a change in the registered office address, ad in writing of this change.	gree to ac e perform led for in I hereby c	t in this c nance of r Chapter ( confirm th	capacity. I further agree to comply with the my duties, and I am familiar with and accept 605, F.S. Or. if this document is being filed that the limited liability company has been	
Signature of Registered Agent GRACE E. KIRBY				Y, ASST. VICE PRESIDENT	
ക്യവമധ	ue or registered whent /				