page 1

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Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)694-1639

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LLC REGISTERED AGENT CHANGE LEAGUE CITY OFFICE BUILDING, LLC

Certificate of Status	0
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Page Count	02
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O SIMMONS

Help JAN 23 2020

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

²ursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company ubmits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Nam	e of the limited liability company:	FICE B	JILDING, LLC	······································					
	010 WEST BOY SCOUT BOULEVARD, SUITE 200	(b)		BOY SCOUT BO			E 200		
_	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Principal office address of limited liability company: Mailing address of (Note: MUST BE STREET ADDRESS) (Note: MAY BI				flimited liability company: E POST OFFICE BOX			
-	TAMPA, FL 33607	_	TAMPA, FL	33607					
-)5/30/2018		 _18000133 7 87						
_	Date of filing/registration in Florida BALDWIN, LOWRY L	4.	Do	ocument number	_				
) F	Registered Agent and Registered Office shown on the records of a 4010 WEST BOY SCOUT BOULEVARD, SUITE 200	he Florida	Dept, of State:		SECRE	2020 JAN 22	ı		
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS	·		AHAS		1		
	TAMPA, FL	33607				PM 12: 14	Į.		
ì	Corporate Creations Network Inc.		<u> </u>		P.E	-			
i	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	<u>dress</u> :						
	801 US Highway I								
	NEW Registered Office Address:								
	North Palm Beach F1	33408							
ige it w	mited liability company is not organized under the lay or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited livre authorized by an affirmative vote of the members cales of organization or the operating agreement of the	register ability of of the lin limited	ompany, it is laited liability liability comp	hereby confirmed company or as other	that the cha	ange(s)			
enat	ure of a member or authorized representative of a member	-		Printed or typed name	of signee				
visii obli nere	by accept the appointment as registered agent and aging on sof all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address. It is writing of this change.	d for in hereby c	t in this capac ance of my di Chapter 605, onfirm that th	city. I further agre uties, and I am fan F.S. Or, if this do ne limited liability	ee to compl niliar with cument is company h	ly with i and acc being fi nas beer	the sept led 1		
щ	te of Registered Agent	,							

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