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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	me of the limited liability company: MARINA PARE	(INVEST	ΓΜ 	MENTS HOLDINGS MEMBER, LLC		
2. (a)		(b)	o)		
Ì		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	,	ŕ	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			COCONUT GROVE, FL 33133		
		05/30/2018			L18000133793		
3.		Date of filing/registration in Florida	4.	_	Document number		
5. 1	(a)						
J. (a,	(u)	Registered Agent and Registered Office shown on the records o NRAI SERVICES, INC.	the Florid	la l	a Dept. of State:		
		Registered Office Address (MUST BE FLORIDA STREET	ADDRES	S)	<u>S)</u>		
		1200 S PINE ISLAND RD			2		
		PLANTATION, F	L_33324	_	2024 JUH 18 Alt 9: 40		
(b)	Enter name of NEW Registered Agent and/or NEW Registere	d Office no	 aa	Market		
		Enter hance of MEAN REGISTER AND OF MEAN REGISTER	d Wilke at	.,,(1	ares.		
		Corporation Service Company			9: 49		
		NEW Registered Office Address:					
		1201 Hays Street					
		Tallahassee . F	32301				
chai agei was the a	ige it w /we artic	mited liability company is not organized under the la or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited li re authorized by an affirmative vote of the members cles of organization or the operating agreement of the	ws of the e register lability co of the lin	on nit lia	ed office and the business office of the registered ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in		
Si	gnat	ure of a member or authorized representative of a member		_	Printed or typed name of signee		
I he prov the o to m notij	reb isio obli ere fied	by accept the appointment as registered agent and agens of all statutes relative to the proper and complete gations of my position as registered agent as provide by reflect a change in the registered office address, I in writing of this change.	ree to act perform ed for in C hereby c	t i. ar Çl or	in this capacity. I further agree to comply with the ance of my duties, and I am familiar with and accept hapter 605, F.S. Or, if this document is being filed on firm that the limited liability company has been		
Sign	atur	Draca C-Kuby e of Registered Agent	GRACE	E.	E. KIRBY, ASST. VICE PRESIDENT		