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CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

Date: 08/30/2022

| | Acc#I20160000072 |
|---|---|
| Name: | LL25.80, LLC |
| Document #: | |
| Order #: | 14516730 |
| Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of | |
| Apostille/Notarial Certification: | Country of Destination: Number of Certs: |
| Filing: 🗸 | Certified: Plain: ✓ COGS: |
| Availability Document Examiner Updater Verifier W.P. Verifier Ref# | Amount: \$ 25.00 |

Thank you!

* 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 | ime of the limited liability company: LL25,80, LLC | | · | | | | | | |
|-----------------------------|--|----------------------------------|--|--|---------------------------|---------------------------------------|--|--|--|
| 2. (a) | 153 E Flagler St. # 570 | (h) 153 E Flagler St. # 570 | | | | | | | |
| 2. (11) | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | (,, | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | | | | | | |
| | MIAMI, FL 33131 | | MIAMI, FI. 33131 | | | | | | |
| | · | | | | | | | | |
| | | | | | | | | | |
| 3. | Date of filing/registration in Florida | 4. | Document | number | | <u></u> | | | |
| 5. (a) | FRANK, WEINBERG & BLACK, P.L., ATTN: ROBERT | SLATO | TF. | | | | | | |
| | Registered Agent and Registered Office shown on the records of the Florida Dept. of State: | | | | | | | | |
| | Registered Office Address (MUST BE FLORIDA STREET ADDRESS) | | | 2022 AUG 30 SECRLTALA | | | | | |
| | 1875 NW CORPORATE BLVD, SUITE 100 | | | AUS AUS | | 12 NCO | | | |
| | BOCA RATON FL. | 33431 | | (P) (T) | | fluido Swown | | | |
| /1 > | C T Corporation System | | | OF ST | | | | | |
| (b) | Enter name of NEW Registered Agent and/or NEW Registered | Office add | lress: | - : | | | | | |
| | NEW Registered Office Address: | | <u></u> | | | | | | |
| | 1200 South Pine Island Road | | | | | | | | |
| | | | | | | | | | |
| | Plantation, FL | 33324 | | | | | | | |
| the cha agent was/w | imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members o icles of organization or the operating agreement of the | the regisability co Table lim | stered office and the be impany, it is hereby co ited liability company iability company. | usiness office onfirmed that or as otherwi | of th the ch ise pr | e registered nange(s) ovided in | | | |
| | from en fl | | √ase <u>J</u> 6 | ארים אים אים אים yped name of sig | URLC | os H | | | |
| | nure of a member or authorized representative of a member | | | | | | | | |
| provis the ob- to mer | by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provided liverallect a change in the registered office address, I lake the writing of this change. CT Conversion Systems | perform | mce of my duties, and | ' Lam familiai | r with | and accen | | | |
| By: Signati | C T Corporation System | | | | | | | | |
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Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00