(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer						
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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	: I2000	0000195
	REFERENCE	: 96811	9 7778917
	AUTHORIZATION	: _	
	COST LIMIT	25125	dena.
ORDER DATE :	August 18, 2021		
ORDER TIME :	2:26 PM		
ORDER NO. :	968119-021		
CUSTOMER NO:	7778917		
		<b>-</b>	
	CHANGE OF A	GENT	
	<u> </u>	<del></del>	
NAME:	LONG BEN LANE	, LLC	
PLEASE RETURN	THE FOLLOWING AS	PROOF OF	FILING:
CERTI	FIED COPY		
	STAMPED COPY		

EXAMINER:

CONTACT PERSON: Alexxis Weiland -- EXT#

## 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	lame of the limited liability company: LONG BEN LA	NE, LLC			
2. (a)	·	(	b)_		
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: tNote: MAY BE POST OFFICE BOX)	
	22927 LONG BEN LANE		2	22927 LONG BEN LANE	
	CUDJOE KEY, FL 33042		_	CUDJOE KEY, FL 33042	
	01/02/2019		L	L19000004527	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a	)				
٥. (۱	Registered Agent and Registered Office shown on the records of	the Florid	la De	Dept. of State:	
	SCULLY, DAVID M				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	<u>S)</u>		
	1323 SE THIRD AVENUE			<b>20</b> :	
	FORT LAUDERDALE FI	33316		SECRETALLA	
				6 20 F	
(b)	Enter name of NEW Registered Agent and/or NEW Registered				
	Enter name of NEW Registered Agent and/or NEW Registered	d Office at	ddre	[ * ] * ————————————————————————————————	
	Corporation Service Company				
	NEW Registered Office Address:			77, 0.	
	1201 Hays Street				
	Tallahassee	32301			
chang agent was/w the ar	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the Louis Magnan	ws of the register ability co of the lin	ed omp nite liab	office and the business office of the registered pany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in	
Signature of a member or authorized representative of a member			Printed or typed name of signee		
I here provis the ob to mei	ehy accept the appointment as registered agent and agricons of all statutes relative to the proper and complete digations of my position as registered agent as provide rely reflect a change in the registered office address, I will in writing of this change.	ree to act perform d for in ( hereby c	t in anc Cha onfi	n this canacity. I further goree to comply with the	
Signat	ure of Registered Agent				