1190000321086

(Re	questor's Name)						
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP	MAIT	MAIL					
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

Office Use Only



900333113269

08/19/19--01031--024 **25.00

13 TYPE OF PH 2: 30

Ra Change

AUG 2 9 2019

D CUSHING

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: FLORIDA CMG, LLC		
	ne of Limite	d Liability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Off	fice Change	and fee(s) are submitted for filing.
Please return all correspondence concerning th	nis matter to	the following:
Etan Mark, Esq.		
Name of Person		
MARK MIGDAL & HAYDEN		
Firm/Company		
80 SW 8th Street		
Address		
Miami, Florida 33130		
City/State and Zip Code		
mish@markmigdal.com		
E-mail address: (to be used for future an	nual report n	otification)
For further information concerning this matter	, please call	:
Etan Mark	305	374-0440
Name of Person	" (Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee. Florida 32314
Enclosed is a check for the following	g amount:	
☑ \$25 Filing Fee		\$55 Filing Fee & Certified Copy

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.

2. (a)	Dave Jonas	(b)				
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)		ailing address of limited lial		r.
	80 SW 8th Street					
	Miami, Florida 33130					
	01/31/2019	J	L1900003	2686		
3.	Date of filing/registration in Florida	4.	Ω	Document number		
5. (a)	Dave Jonas					
()	Registered Agent and Registered Office shown on the records	of the Florida I	Dept. of State:			
	Dave Jonas					
	Registered Office Address [MUST BE FLORIDA STREE	T ADDRESS)				
	3339 VIRGINIA STREET, UNIT 201					
	MIAMI	FL 33133				
(b)	MARK MIGDAL & HAYDEN LLC				19	三 (25) (25)
(0)	Enter name of NEW Registered Agent and/or NEW Register	red Office addi	·ess:		AUG	
	MARK MIGDAL & HAYDEN				<u></u>	3 3 3 3
	NEW Registered Office Address:				<u> </u>	: =
	80 SW 8TH STREET, SUITE 1999				2: 3	15°C
	MIAMI	_{FL} 33130			30	10.48 10.48
the cha agent w was/we	mited liability company is not organized under the nge or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the member cles of organization or the operating agreement of the	of the regist I liability con is of the limit	ered office a npany, it is l ted liability	and the business office hereby confirmed that company or as otherw	of the regis the change(stered (s)
				Dave Jonas		
Signat	ure of a member or authorized representative of a member		1	Printed or typed name of sig	gn ce	
provision (he obli (o m e re	by accept the appointment as registered agent and cons of all statutes relative to the proper and complete gations of my position as registered agent as providing the reflect a change in the registered office address, it is writing of this change.	agree to act i ete performa ded for in C I hereby coi	n this capac nce of my di hapter 605, nfirm that th	city. I further agree to ities, and I am familia F.S. Or, if this docum te limited liability com	comply with r with and a ent is being pany has be	h the iccep filed sen

Signature of Registered Agent