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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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## LLC REGISTERED AGENT CHANGE VILLAGE AT BANYAN RIDGE, LLC

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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	ame of the limited liability company: VILLAGE AT I	Banyan rii	DGE, LLC
2. (a)	12895 SW 132ND ST., MIAMI, FL 33186	(b) <sup>1</sup>	12895 SW 132ND ST., MIAMI, FL 33186
`,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	02/08/2019	— <u> </u>	9000039989
3.	Date of filing/registration in Florida CORPORATION SERVICE COMPANY	4.	Document number
	Registered Agent and Registered Office shown on the records of 1201 HAYS ST  Registered Office Address (MUST BE FLORIDA STREET)		ept. of State:
	TALLAHASSEE , F	L	2022 JUN 1 4
(b)	Corporate Creations Network Inc.		
(*)	Enter name of NEW Registered Agent and/or NEW Registere	d Office addre	strain in main main main main main main mai
	801 US Highway 1		PH 2:
	NEW Registered Office Address:		
	North Palm Beach , F	L_33408	
:bange igent w was/we	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 line authorized by an affirmative vote of the members cles of organization or the operating agreement of the	e registered o lability comp of the limited e limited liabi	office and the business office of the registered any, it is hereby confirmed that the change(s) I liability company or as otherwise provided in
Signat	ure de member or authorized representative of a member		Printed or typed name of signee
provision he oblico mere totified	by accept the appointment as registered agent and agent 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 whiting of this change.  Adia Myles, Special Secretary of Registered Agent	e performanci	e of my duties, and I am familiar with and accept

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