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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.

Account Number : 072720000036

: (407)843-4600

Phone Fax Number

: (407)377-6544

Attn: Taml D. Medrano

\*Enter the email address for this business entity to be used for future, annual report mailings. Enter only one email address please.\*\*

Email	Address:	

## LLC REGISTERED AGENT CHANGE WESTSIDE CONSTRUCTION MANAGEMENT, LLC

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K. SALY

DEC - 6 2024

## 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.	Ne	ame of the limited liability company: Westside Constru	ction Ma	nagement, L	LC		
כ	(a)		ď	n)			
۷.	(4)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ `		_	nited liability company: OST OFFICE BOX)	
		2000 Ponce de Leon Boulevard, Suite 600		2000 Pond	ce de Leon Boulevan	d, Suite 600	
		Coral Gables, Florida 33134	<del>-</del>	Coral Gab	oles, Florida 33134		
		Filed 03/04/2019 effective 03/01/2019		L1900006	1783		
3.		Date of filing/registration in Florida	4.		Document numbe	er	
٢	(a)						
5,	(a)	Registered Agent and Registered Office shown on the records of	the Florid	Dept. of Stat	te:		
		HINSHAW & CULBERTSON LLP ATTN: NEIL S. ROI					
		Registered Office Address (MUST BE FLORIDA STREET	1DDRES	22	_	. 29	
		2525 PONCE DE LEON BLVD, 4TH FLOOR				241	7
		CORAL GABLES , FL	33134		<del>-</del>	2024 DEC T	=
				•	_	<i>ග</i> ්. <b>ර</b>	'n
	(b)	Enter name of NEW Registered Agent and/or NEW Registered			_	图 星	,
		Enter name of NEW Registered Agent and/or NEW Registered	Office Au	dress:		500 00	
		VCORP AGENT SERVICES, INC.			_	PH 5: 12	· •
		NEW Registered Office Address:			_		
		1200 SOUTH PINE ISLAND ROAD			_		
		PLANTATION, FL	33324		_		
ehi ngo wa the	ange ent v is/we arti	mited liability company is not organized under the law or changes are made, the Florida street address of the vill he identical. Or, in the case of a Florida limited lia tre authorized by an affirmative vote of the members of cless of organization or the operating agreement of the law of a member or authorized representative of a member on a complete to the proper and complete in gations of my position as registered agent as provided by reflect a change in the registered office address, I have the proper and complete the proper	registere shility or f the lim limited l	ed office an impany, it is sited liabilit iability con Reisman	d the business offices hereby confirmed or typed name.  Printed or typed name.	ce of the registered i that the change(s) therwise provided i	n .
the to no	obli mere tified	igations of my position as registered agent as provided by reflect a change in the registered office address, I have the change of this change.	i jor in C iereby ci	napter 603 Infirin that	the limited liability	ocument is being fl company has beer	iea n
βiį	gilatui	e of Registered Agent					