## 119000167644

(Requestor's Name)				
(Addre	ess)			
(Addre	ess)			
(City/S	State/Zip/Phon	e #)		
PICK-UP	WAIT	MAIL		
(Busin	ess Entity Nai	me)		
	·	,		
(Document Number)				
Certified Copies	Certificate	s of Status		
Special Instructions to Filing Officer				

Office Use Only



400363700434

FILED 2021 APR 16 AH II: 21 SECRETARY SEE, FL

2021 APR 16 AHTH: SG

RA Change

D CUCHING



115 N CALHOUN ST., STE. 4 TALLAĤASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date: 04/1	6/2021		
Name:N	lerritt Walker		
Reference #:		_ <del>_</del>	
	CRESTVIE	W II LIMITED LLC	
	ncorporation/Authorizatio		
Amendmen	t		·2 25
✓ Change of A	Agent		2021 APR 16 AH II: 21 SEGRETARY OF STATE TALLAHASSEE, FL
Reinstatem	ent		R 16
Conversion			ASSE ASSE
Merger			# 2 존점
Dissolution/	Withdrawal		· m —
Fictitious Na	ame		
Other			
Authorized Amoun	t: <b>\$25</b>		
Signature:	mw		

F: 800.944.6607

## 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.

Ι.	Na	Name of the limited liability company: CRESTVIEW II LIMITED LLC					
2.	(a)		(b)				
		Principal office address of limited liability com (Note: MUST BE STREET ADDRESS)	ipany:	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
		No Change	<u>N</u>	o Change			
		July 9, 2019		L19000167644			
3.		Date of filing/registration in Florida	4.	Document number			
5.	(a)	BCRA, LLC					
. (u	(,	Registered Agent and Registered Office shown on the r	ot, of State:				
		1905 NW CORPORATE BLVD, STE	310				
		Registered Office Address (MUST BE FLORIDA)	STREET ADDRESS)	<del></del>			
				s <b>2</b>			
		BOCA RATON	. FL_33431	FILED 2021 APR 16 AM II: 21 SECRETARY OF STAT TALLAHASSEE, FL			
	(b)	COGENCY GLOBAL INC.		ANNY 6			
		Enter name of NEW Registered Agent and/or NEW Registered Office address:					
		115 North Calhoun St., Suite 4		三 21			
		NEW Registered Office Address:		ţτι			
		Tallahassee	FL_32301				

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

/S/ Sydne Garchik

Sydne Garchik

Signature of a member or authorized representative of a member

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

/S/ Tim Mayville

Signature of Registered Agent

Tim Mayville, Assistant Secretary

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00