11/17/21, 2:28 PM

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000425630 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

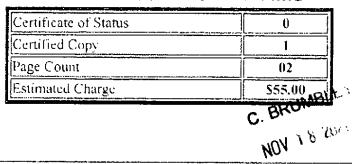
Account Number: FCA000000023

Phone : (614)280-3338 Fax Number : (954)208-0845

\*\*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 SBEHG 1701 COLLINS MIAMILLAC



Electronic Filing Menu Corporate Filing Menu

Help

## 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	me of the limited liability company: SBEHG 1701 Col	lins Mia	ımi LLC		
2.	(a)	9247 Alden Drive Beverly Hills, CA 90210  Principal office address of limited liability company:	(	b)	Mailing address of limited liability company	
		( <u>Note: MUST BE STREET ADDRESS</u> )		•	(Note: MAY BE POST OFFICE BOX)	
		9/4/2019	<del></del>	L19000224	169	
3.		Date of filing/registration in Florida	4.		Document number	
5	(a)	Corporation Service Company				
٥.	(11)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  1201 Hays St  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			40	
					PIL 2021 NOV 17 SECKÉ JANA	
	(b)	Tallahassee, FL_	32301		<u> </u>	
		C T Corporation System			SEE BY	
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Officen	ddress:	₹1.5°	
		NEW Registered Office Address:			-	
		1200 South Pine Island Road			_	
		Plantation, FL	33324		-	
tho ag wa	ent v is/we	mited liability company is not organized under the law nge or changes are made, the Florida street address of vill be 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	the reg ibility of if the li- limited	istered office company, it i mited liabilit	e and the business office of the registered s hereby confirmed that the change(s) by company or as otherwise provided in	
	Signal	ure of a member or authorized representative of a pember		- Arectos	Printed or typed name of signee	
1) pro the	ierel ovisi obl mega	by accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete ignitions of my position as registered agent as provide by reflect a change in the registered office address, I have	perjori d för in hereby ( -	mance of my Chapter 60, confirm that	acity. I further agree to comply with the duties, and Lam familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been	
ло Ву		for writing of this change.  All  Color from System	frec	l Youna	an	
Si	gnatu	re of Registered Agent ASSis	tan	t Secre	etary	