(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
J. HORNE JUN 2 × 2024					

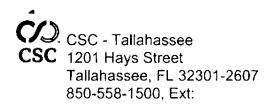
Office Use Only



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2024 JU 27 ANTO 17

RECEIVED



To: Department Of State, Division Of Corporations From: Amanda Miller - Amanda Miller@cscglobal.com

Ext:

Date: 06/27/24 Order #: 1540247-2 Re: DelCir Realty LLC

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Change of Registered-Agent and Office

Check in the amount of: \$35:00 - FL State Account Number: I20000000195

AUTH

Please take the following action:

File on a routine basis Issue proof of filing Return evidence to the following: ATTN: Amanda Miller c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

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. N	ame of the limited liability company: DELCIR REAL	TY LLC			
2. (a)	· · · · · · · · · · · · · · · · · · ·	(1	n)		
•	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	10400 SW 96th Street		10400 SV	V 96th Street	
	Miami, FL 33176		Miami, FL	33176	
	10/25/2019		L19000258	8006	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a))				
υ. (α	Registered Agent and Registered Office shown on the records of	of the Florida	a Dept. of State	- ::	
	DANIELA VANESSA YANEZ				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			-	
	10400 SW 96th Street			20	
	Miami	. 33176		1- 2024 J.C	
	, F	L		_	
4.				12	
(b)	Enter name of NEW Registered Agent and/or NEW Registere	ed Office ad	dress:	- <u> </u>	
			 .	2. 4. 4	
	Corporation Service Company			_ ස	
	NEW Registered Office Address:			•	
	1201 Hays Street			-	
	Tallahassee , F	. 32301			
change	limited liability company is not organized under the la	e registere	ed office and	I the business office of the registered	
agent v was/w	will be identical. Or, in the case of a Florida limited I ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	iability co of the lin	ompany, it is sited liability	hereby confirmed that the change(s) company or as otherwise provided in	
/s/ Iv	van Ramirez	Ivar	n Ramirez, N	Manager	
Signa	ture of a member or authorized representative of a member			Printed or typed name of signee	
provis the ob to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as providely reflect a change in the registered office address, I d in writing of this change.	e perform	ance of my a	luties, and I am familiar with and accept	
<u>人</u> Signati	Irc of Registered Agent				

Grace E. Kirby, Asst. Vice President on behalf of Corporation Service Company
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
FILING FEE: \$25.00