Florida Department of State Division of Corporations Ectronic Filing Cove

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To:

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

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 VILLAGE AT TRADITION, LLC

| Certificate of Status | 0 |
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Corporate Filing Menu

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JUN 15 2022

K. Brumbley

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.

| . Na | ame of the limited liability company: VILLAGE AT T | | | | | | |
|-------|---|--------------------------|--|--------------------------------------|--------------|-------------|---------|
| . (a) | 12895 SW 132ND ST., MIAMI, FL 33186 | | (b) 12895 SW 132ND ST., MIAMI, FL 33186 Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | | | | |
| | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | | | | | | |
| | | | | | | | |
| | 02/25/2020 | _ , | L20000062 | | | <u>-</u> | |
| | Date of filing/registration in Florida | 4. | | Document numi | Der | | |
| (a) | CORPORATION SERVICE COMPANY | | | _ | | | |
| | Registered Agent and Registered Office shown on the records of | of the Flori | da Dept. of Stat | e: | | | |
| | 1201 HAYS ST | | | _ | | | |
| | Registered Office Address (MUST BE FLORIDA STREET | <u> </u> | <u>22)</u> | | | | |
| | TALLAHASSEE | L32301 | | _ | **· · . | 20 | |
| | , I | ·ـــ | | _ | | 122 | |
| (b) | Corporate Creations Network Inc. | | | | : * : | | |
| (0) | Enter name of NEW Registered Agent and/or NEW Registered | ed Office : | ddress: | - | . - | 11 NOC 2202 | =: |
| | 801 US Highway 1 | | | | | -P | : D |
| | NEW Registered Office Address: | | | | | 2: 56 | |
| | North Palm Beach | 33408 | | | | | |
| the l | limited liability company is not organized under the k | aws of th | e State of Fl | – orida, it is hereby | y confirme | d that a | fter th |
| ent v | e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited level authorized by an affirmative vote of the members icles of organization of the operating agreement of the | liability (of the li | company, it i mited liabilit | s hereby confirm by company or as | ied that the | : change | e(s) |
| | (#WO | A | iia Myles, Att | | _ | | |
| igna | ture of a member or authorized representative of a member | | | Printed or typed n | ame of signe | ė | |
| | by accept the appointment as registered agent and as ions of all statutes relative to the proper and complet ligations of my position as registered agent as provid ely reflect a change in the registered office address, i d in writing of this change. | | | | | | |
| gnati | Adia Myles, Special Secretary use of Registered Agent | | | | | | |

. . . .