120000099071

(Requestor's Name)					
(Add	(Address)				
(Address)					
(City	//State/Zip/Phone	e #)			
_	_	_			
PICK-UP	■ WAIT	MAIL			
(Business Entity Name)					
(Doc	cument Number)				
Certified Copies	Certificates	s of Status			
Special Instructions to F					
Special Instructions to Filing Officer:					

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RECFIVED

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

	ACCOUNT NO.	: 120000001	95			
	REFERENCE	: 583464	8373818			
	AUTHORIZATION	Smill de	rea .			
	COST LIMIT	: \$\s\25.00				
ORDER DATE : Ma	rch 31, 2022					
ORDER TIME : 3	:11 PM					
ORDER NO. : 58	3464-030					
CUSTOMER NO:	8373818					
			• • • • • • • • • • • • • • • • • • •			
CHANGE OF AGENT						
NAME: BRUNFELSIA TWENTY-EIGHT-RVP VIA SERIES E COINVEST LLC						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY XX PLAIN STAMPED COPY						
CONTACT PERSON:	Alexxis Weilar	nd EXT#				

EXAMINER:



STATEMENT OF CHANGE OF REGISTERED OFFICE 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: BRUNFELSIA TV	VENTY —	-EIGHT-R	VP VIA SERIES E COINVEST LLC
2. (a)				
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	701 BRICKEL AVENUE, SUITE 2100		701 BRI	CKEL AVENUE, SUITE 2100
	MIAMI, FL 33131	_	MIAMI, F	FL 33131
	04/09/2020		L2000009	99071
3.	Date of filing/registration in Florida	4.		Document number
5. (a)				
<i>5.</i> (a.	Registered Agent and Registered Office shown on the records of the CORPORATE CREATIONS NETWORK INC.	e Florid	a Dept. of St	2.022
	Registered Office Address (MUST BE FLORIDA STREET AD 801 US HIGHWAY 1	2922 APR - 1		
	NORTH PALM BEACH . FL	33408		
(b)				
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office ad	ldress:	~
	Corporation Service Company			
	NEW Registered Office Address:			_
	1201 Hays Street			
	Tallahassee FI 3	32301		
chang agent was/w	imited liability company is not organized under the laws or changes are made, the Florida street address of the rewill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the li	s of the egistero ility co	ed office ar ompany, it i iited liabili	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
	antiago Ulloa	Sar —	itiago Ulloa	a - Manager
Signa	ture of a member or authorized representative of a member			Printed or typed name of signee
provis the ob- to mer notifie	by accept the appointment as registered agent and agree ions of all statutes relative to the proper and complete poligations of my position as registered agent as provided lely reflect a change in the registered office address, I he d in writing of this change.	ertorma	mce ot my	duties and I am familiar with and accept
	re of Registered Agent E. Kirby, Asst. Vice President			
J. 1101	Division of Corporations P.O. Bo	ox 6321	7• Tallaha	issee, FL 32314

FILING FEE: \$25.00