## L 20000146787

(Re	equestor's Name)				
(Ad	dress)				
(Address)					
(Cit	y/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	of Status			
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195					
REFERENCE : 736682 8071995					
AUTHORIZATION : Nelle Man					
COST LIMIT : \$ 25.00					
ORDER DATE: March 30, 2021					
ORDER TIME : 10:59 AM					
ORDER NO. : 736682-010					
CUSTOMER NO: 8071995					
CHANGE OF AGENT					
<u> </u>					
NAME: BRITTON REALTY OF VERO BEACH,					
LLC					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY					
AA PHAIN STAMPED COPT					
CONTACT PERSON: Eyliena Baker EXT#					
EXAMINER:					

## COVER LETTER

· co	OVER LETTER
TO: Registration Section Division of Corporations	
Britton Realty of Vero Beach, LLC SUBJECT:	
Name of Li	mited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Char	nge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	r to the following:
Andrew Kaplan, Esquire	
Name of Person	
Epstein Becker & Green, P.C.	
Firm/Company	<u> </u>
1 Beach Drive SE Suite 303	
Address	<del></del>
St. Petersburg, FL 33701	
City/State and Zip Code	<del></del>
ANKaplan@ebglaw.com	
E-mail address: (to be used for future annual repo	ort notification)
For further information concerning this matter, please of	call:
Andrew Kaplan, Esquire 6	509 455-1543
Name of Person	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amoun	t:
□ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
INHS18 (2/14)	

## 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.

l. Na	ame of the limited liability company:	of Vero	Beach, LLC		<del></del>	
2. (a)	Britton Realty of Vero Beach, LLC		Britton Realty of Vero Beach, LLC			
	Principal office address of limited liability company:			Mailing address of limited		
	(Note: MUST BE STREET ADDRESS)			(Note: MAY BE POST	<u>r office box</u> )	
	227 Bakers Basin Road		227 Bake	ers Basin Road		
	Lawrenceville, NJ 08648		Lawrence	eville, NJ 08648		
	June 4, 2020		L2000014	6787		
	Date of filing/registration in Florida	<del>-</del> 4.	-	Document number		
	Corporation Service Company					
. (a)	Registered Agent and Registered Office shown on the records of	f the Flor	ida Dept, of Sta	te:		
	1201 Hays Street					
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE	22)	<del>-</del>		
				_		
	Tallahassee, F	32301 L	 	_		
0.3	Attn: Andrew Kaplan, Esq.					
(b)	Enter name of NEW Registered Agent and/or NEW Registere	d Office	nddress:	-		
		-			3	
	Epstein Becker & Green, P.C Andrew Kaplan, Es	q.				
	NEW Registered Office Address:			_		
	1 Beach Drive SE Suite 303					
				_	MAN AN O	
	St. Petersburg	33701			جه جه الله	
		<u></u>		_	T > 0	
the li	mited liability company is not organized under the la	ws of th	e State of Flo	orida, it is hereby con	firmed that after the	
iange gent w	or changes are made, the Florida street address of the identical. Or, in the case of a Florida limited !	e regisie iability (	red office an company, it is	s hereby confirmed th	of the registered	
as/w	relauthorized by an affirmative vote of the members	of the li	mited liabilit	v company or as othe	rwise provided in	
ie aptie	es of organization or the operating agreement of the	e iimited	i hability con	npany.		
_L/		Ar	ndrew Kaplar	n, Esquire		
Signati	ure of a member or authorized representative of a member			Printed or typed name of	f signee	
e obli mare	y accept the appointment as registered agent and ag ons of all statutes relative to the proper and complete actions of my position as registered agent as provide by reflect a change in the registered office address, I in writing of this change.	e perfort	nance of my i	duties, and I am famil	liar with and accept	
I/V	WIL					
ignatur	e of Registered Agent					