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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : INCORP SERVICES INC
Account Number : I20120000007
Phone : (702)866-2500
Fax Number : (702)900-2290

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC REGISTERED AGENT CHANGE
8700 OBT ORLANDO HOLDINGS LLC

Certificate of Status	0
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M. SOLOMON
JUL 30 2024

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 8700 OBT ORLANDO HOLDINGS LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Melanie Galero
Name of Person

InCorp Services, Inc.
Firm/Company

9107 West Russell Road Suite 100
Address

Las Vegas, NV 89148-1233
City/State and Zip Code

documents@incorp.com
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Melanie Galero for InCorp Services, Inc. at 800-246-2677
Name of Person — Area Code & Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, 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 amount:

☒ $25 Filing Fee

☐ $55 Filing Fee & Certified Copy

INHS18 (2/14)

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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. Name of the limited liability company: 8700 OBT ORLANDO HOLDINGS LLC

2. (a) 7777 Glades Rd., Ste. 215
Principal office address of limited liability company.
(Note: MUST BE STREET ADDRESS)
Boca Raton, FL 33434

(b) 390 NE 191st St., Ste. 8139
Mailing address of limited liability company.
(Note: MAY BE POST OFFICE BOX)
Miami, FL 33179

3. 07/07/2020
Date of filing/registration in Florida

4. L20000193550
Document number

5. (a) RISE8 MANAGEMENT LLC
Registered Agent and Registered Office shown on the records of the Florida Dept. of State

7777 Glades Rd.
Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

Ste. 215

Boca Raton, FL 33434

(b) InCorp Services, Inc.
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**

3458 Lakeshore Drive
NEW Registered Office Address

Tallahassee, Fl 32312

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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Robert Beyer
Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Louise Breytenbach on behalf of InCorp Services, Inc.
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: $25.00