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Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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 9248 EMERSON SURFSIDE LLC

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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 665,0114 or 605,0116, Florida Statutes, the undersigned limited hability company submits the following statement in order to change its registered office or registered agent, or both in the State of

(a)	(b)							
	Principal office address of limited hability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability compar (Note: MAY BE POST OFFICE BOX)					
	7901 4th St N STE 300		7901 4th St N STE 300					
	St. Petersburg, Ft. 33702		St. Petersburg, FL 33702					
	08/20/20		L20000243745					
	Date of filing/registration in Florida	∴ .	Document number					
	FLORIDA FILING & SEARCH SERVICES, INC.							
(a)	Registered Agent and Registered Office shown on the records o Registered Office Address (MUST BE FLORIDA STREET)	the Flori	rida Dept. of State:					
(11)	Registered Agent and Registered Office shown on the records o Registered Office Address (MUST BE FLORIDA STREET 155 OFFICE PLAZA DR., SUITE A	ADDRE	rida Dept. of State: ESS)					
	Registered Agent and Registered Office shown on the records of Registered Office Address [MUST BE FLORIDA STREET] 155 OFFICE PLAZA DR., SUITE A TALLAHASSEE F	the Flori	ESS) 1					
	Registered Agent and Registered Office shown on the records o Registered Office Address (MUST BE FLORIDA STREET 155 OFFICE PLAZA DR., SUITE A	ADDRES	ESS) 1					
	Registered Agent and Registered Office shown on the records of Registered Office Address (MUST BE FLORIDA STREET) 155 OFFICE PLAZA DR., SUITE A TALLAHASSEE FREGISTERED F	ADDRES	ESS)					
	Registered Agent and Registered Office shown on the records of Registered Office Address (MUST BE FLORIDA STREET) 155 OFFICE PLAZA DR., SUITE A TALLAHASSEE FREGISTERED FREG	ADDRES	ESS) Address: 2024 0.77 mg/s					
(a)	Registered Agent and Registered Office shown on the records of Registered Office Address (MUST BE FLORIDA STREET) 155 OFFICE PLAZA DR., SUITE A TALLAHASSEE FRegistered Agent and/or NEW Registered Agent and/or NEW Registered Agent 4 and/or NEW R	ADDRES	ESSY Address:					

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.

what we provey	Robin Jones	
Signature of a member or authorized representative of a member	Printed or typed name of signee	

Thereby 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 tiled to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in vertice of this change. ngiffed in writing of this change.

Assistant Secretary

Signature of Registered Agent

David Roberts