2000 281653

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer.				
MAY 15 TORNE				

Office Use Only



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2025 HAT 12 AM 9: 40

2025 MAY 12 PM 3: 25

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO.	:	120000000	195			
REFERENCE	:	212029	8476616			
AUTHORIZATION	:					
COST LIMIT	:	\$ 25.00				
	-					
ORDER DATE: May 5, 2025						
ORDER TIME : 2:53 PM						
ORDER NO. : 212029-046						
CUSTOMER NO: 8476616						
CHANGE OF AGENT						
NAME: OCEANAIRE MHC	LL(3				
PLEASE RETURN THE FOLLOWING AS	יממ	DOE OF FIL	TMC.			
PLEASE RETURN THE FOLLOWING AS	PR	JOE OF FIL	IING.			
CERTIFIED COPY PLAIN STAMPED COPY						
CONTACT PERSON: Shauna Godbols	t	- EXT#				

EXAMINER: _____

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. Na	ame of the limited liability company: OCEANAIRE N	NHC LLC	C
2. (a)		(1	(b)
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	10221 River Road, Suite 59831		10221 River Road, Suite 59831
	Potomac, MD 20859	_	Potomac, MD 20859
	09/16/2020		L20000281653
3.	Date of filing/registration in Florida	4.	Document number
5. (a)			
J. (a)	Registered Agent and Registered Office shown on the records of	f the Florid	ida Dept. of State:
	WYSS, JONATHAN		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES.	
	3191 GRAND AVE #331774		
	MIAMI F	33133 L	205 His 12 His 9: 40 address:
(b)	Enter name of NEW Registered Agent and/or NEW Registere	1.000	
	Enter name of NEW Registered Agent and/or NEW Registere	d Office ac	address:
	Corporation Service Company		•
	NEW Registered Office Address:		
	1201 Hays Street		
	Tallahassee, F	32301 L	1
change agent v was/w the art	imited liability company is not organized under the lag or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited light ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the ustin Berk	e register iability co of the lin	company, it is hereby confirmed that the change(s) imited liability company or as otherwise provided in
	ature of a member or authorized representative of a member		Printed or typed name of signee
provisi the obj to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d'in writing of this change.	ree to aco perform ed for in (hereby c	act in this capacity. I further agree to comply with the mance of my duties, and I am familiar with and accep a Chapter 605, F.S. Or, if this document is being filed confirm that the limited liability company has been
Signati	ire of Registered Agent		

Grace E. Kirby, Asst. Vice President