

L20 000 37 1136

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

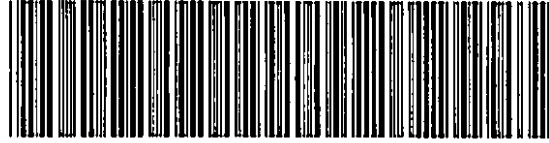
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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08/29/2022 11:45:04

2022 DEC 27 PM 4:04

REC-30

A handwritten signature in black ink, consisting of a large, stylized 'D' followed by a horizontal line and a vertical stroke.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2022 DEC 27 PM 2:17

December 1, 2022

MATTHEW WIDELSTEIN
615 OCEAN DRIVE UNUTE 7B
KEY BISCAYNE, FL 33149

SUBJECT: UNVNOTE MANAGER LLC
Ref. Number: L20000371136

We have received your document for UNVNOTE MANAGER LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tammi Cline
Regulatory Specialist II Supervisor

Letter Number: 322A00026615

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10:50

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: UNNOTE MANAGER 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:

Matthew Edelstein
Name of Person

UNNOTE MANAGER LLC
Firm/Company

615 Ocean Drive, Unit 7B
Address

Key Biscayne, FL 33149
City/State and Zip Code

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E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Matthew Edelstein at (305) 812-1186
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

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: UNVNOTE MANAGER LLC

2. (a) _____ (b) _____
 Principal office address of limited liability company: Mailing address of limited liability company:
 (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

615 Ocean Drive, Unit 7B
Key Biscayne, FL 33149

615 Ocean Drive, Unit 7B
Key Biscayne, FL 33149

3. 11/24/2020
 Date of filing/registration in Florida

4. L20000371136
 Document number

5. (a) Matthew Eidelstein
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
650 Ocean Drive, suit 8C
Key Biscayne, FL 33149

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(b) Matthew Eidelstein
 Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:
615 Ocean Drive, Unit 7B
Key Biscayne, FL 33149

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.

Matthew Eidelstein
 Signature of a member or authorized representative of a member

Matthew Eidelstein
 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.

Matthew Eidelstein
 Signature of Registered Agent