11/20/23, 12:16 PM

Division of Corporations

## Florida Department of Spate

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## LLC REGISTERED AGENT CHANGE FLORIDA SLB, LLC

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From: Kaity Toon

## 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.

I. N	ane of the limited liability company: Florida SLB LLC		····			_	
2. (a)		C	b)				
• •	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	• `		Mailing address of lim (Note: MAY BE Po	ited liability	compan	<b>)</b> :
	3085 Munroe Drive Miami, FL 33133		505 South Flugler Drive Suite 900				
	West Palm Beach, FL 33401	<del>-</del> . -	West Palm	Beach, FL 33401			
	12/23/2020		1.210000036	51			
<b>3</b> .	Date of filing/registration in Florida	4.		Document numbs	tr		
5. (a)	WEISS, CHARLES T						
2. (uj	Registered Agent and Registered Office shown on the records of th	s: Florid	n Dept. of State	- ::			
	Registered Office Address (MUST BE FLORIDA STREET A	DDRES	<u>Si</u>	-			
	712 US HIGHWAY ONE STE 301-2						
	NORTH PALM BEACH FL. 3	3408	·	-		207	
(b)	C T Corporation System				<u></u>	2023 NOV	,
(0)	Enter name of NEW Registered Agent and/or NEW Registered (	Iffice at	ldress:	-		N 20	下学
							50
	NEW Registered Office Address:			<del>-</del>		PH 12:	•
	1200 South Pine Island Road			<u>.</u>	: -	- 5	
	Plantation FL	33324		_			
the chargent was/w the art	imited liability company is not organized under the law ange or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited lial ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the I	s of the reg bility c the lit imited	e State of Flo istered office ompany, it i nited liabilit liability con	orida, it is hereby e and the business s hereby confirme y company or as o npany.	office of d that the otherwise	the reg change provide	istered (5)
w mer notifie By:	by accept the appointment as registered agent and agree tons of all statutes relative to the proper and complete place of my position as registered agent as provided ely reflect a change in the registered affice address. I had in writing of this change.  CT Corporation System  CR Registered Agent	erenic	.organi mai	me ummed ngodi	gree to con amiliar wi document ty compan	mply wi ith and is bein iy lus b	th the accept g filed een

To:

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