## Lalooblos

(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:							
J HORNE							
JUN 2 3 2022							

Office Use Only



500388439625

2022 JUN 22 PM 12: 01

2022 JUN 22 PH IZ: 00

RECEIVED





Account#: I20000000088

Date:	06/21/2022	<del> </del>	
	Merritt W	/alker	_
Referen	ce #: <b>171</b>	3132	_
			ST LAKE MEZZANINE, LLC
	articles of Incorporation	on/Authorization	to Transact Business
	Amendment		
<b>V</b> (	Change of Agent		
<u></u>	Reinstatement		
	Conversion		
	Merger		
	Dissolution/Withdrawa	al	
F	ictitious Name		
	Other		
	•		
Authoriz	zed Amount:	\$25	<del></del>
Signatu	re:	mw	

F: 800.944.6607

+44 (0)20.3961.3080



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:	06/21/2022							
Name:	Merritt Walker	<b></b>						
Reference #	#:1713132	_						
		ST LAKE MEZZANINE, LLC						
Article	es of Incorporation/Authorization	to Transact Business						
Amer	ndment							
Change of Agent								
☐ Reins	statement							
☐ Conv	Conversion							
☐ Merg	er							
☐ Dissolution/Withdrawal								
Fictiti	ous Name							
Other	r							
Authorized A	Amount: <b>\$25</b>	<del></del>						
Signature: _	mw							

+44 (0)20.3961.3080

## 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.

Name of the limited liability company	MARKET ST	MARKET STREET EAST LAKE MEZZANINE, LLC			
2. (a) 1515 Indian River Blvd, Suite	e A232	(b)			
Principal office address of limited (Note: MUST BE STREET	. , ,		Mailing address of limited (Note: MAY BE POS		
Vero Beach, Florida, 32960					
		<del>-</del>	<u>.                                    </u>		
February 4, 2021  Date of filing/registration	in Donish		L21000061051		
JAME LANG TOANT	in rionga	4.	Document number		
5. (a) WILLIAMS, JOAN T			<del></del>		
Registered Agent and Registered Office sl	nown on the records of the	ne Florida Dept. of S	State:		
445 24TH STREET					
·	<u>E FLORIDA STREET A</u>	DDRESS)			
SUITE 300					
VERO BEACH	FL_	32960			
(b) COGENCY GLOBAL INC.				7.5 <b>20</b>	
(b) Enter name of NEW Registered Agent as	Mar XFW Registered (	Office oddress:	<del>-</del> [	2022 JUN	
Tarket hank of <u>1970 Megorical Agent</u> an	id of Registeres	mice address.	â	適量 II	
115 North Calhoun St., Suite	e 4		į.	FIL 2022 JUN 22 SECRETARY	
NEW Registered Office Address:			<del></del>	3-	
				PHIZ: 0	
	<del></del>				
Tallahassee	FI	32301			
If the limited liability company is not orgathe change or changes are made, the Floridagent will be identical. Or, in the case of a was/were authorized by an affirmative vot the articles of organization or the operating	mized under the law da street address of t a Florida limited lial te of the members of	s of the State of the registered off bility company, the limited liab	lice and the business of it is hereby confirmed t ility company or as othe	fice of the registered hat the change(s)	
/s/ Joan Williams	- <del>-</del>	Joan Willian			
Signature of a member or authorized representation	ve of a member		Printed or typed name of	f signee	
I hereby accept the appointment as regists rovisions of all statutes relative to the proble obligations of my position as registere of merely reflect a change in the registered of this change.	ered agent and agre oper and complete <sub>l</sub> d agent as provided d office address, I h	ve to act in this coerformance of n for in Chapter ( ereby confirm th	apacity. I further agree w duties, and I am fam 605, F.S. Or, if this doc at the limited liability c	e to comply with the iliar with and accep rument is being filed company has been	
/s/ Timothy Mayville					

Timothy Mayville, Assistant Secretary

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

Signature of Registered Agent