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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

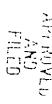
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LLC REGISTERED AGENT CHANGE **HUNTER KEYS REALTY LLC**

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COVER LETTER

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Registration Section Division of Corporations

HUNTER KEYS REALTY 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:

Joshua Murphy		_			
Name of Person					
Registered Agent Solutions, Inc.					
Firm/Company		_			
Corporate Center One, 5301 Southwes	st Pkwy, Ste 4	00			
Address		_			
Austin, TX 78735					
City/State and Zip Code		_			
E-mail address: (to be used for future and	ual report notifi	cation)			
For further information concerning this matter,	please call:				
Joshua Murphy	888 at (705-7274			
Name of Person		Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Reg Div P.O	gistration Section dision of Corporations b. Box 6327 lahassee, Florida 32314			
Enclosed is a check for the following	Enclosed is a check for the following amount:				
□ \$25 Filing Fee	□ \$5	5 Filing Fee & Certified Copy			
INHS18 (2/14)					

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. LUNITED MENO DE ALTIMALO

1. Na	ime of the limited liability company: HUNIEF	KEYSRE		· · · <u>- · · · · · · · · · · · · · · · ·</u>
2. (a)	2290 BELLMORE	_(b) 2290 I	BELLMORE	
(/	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Ma	illing address of limited liabil	
	AVEBELLMORE, NY 11710		ELLMORE, N	
	7.VEDELLIVIONE, IVI TITIO	711201		
	4/8/2021	L21000	0149212	
3.	Date of filing/registration in Florida	4. D	Ocument number	
5. (a)	BLUMBERGEXCELSIOR CORPORATE S	ERVICES, INC.		
J. (a)	Registered Agent and Registered Office shown on the records of the 155 OFFICE PLAZA 1ST FL			
	Registered Office Address (MUST BE FLORIDA STREET)	IDDRESS)		
				20
	TALLAHASSEE, FL	32301		APTROVES AND FILED
(b)	Registered Agent Solutions,	Inc.	•	計画機能
(0)	Enter name of NEW Registered Agent and/or NEW Registered		· 	
	155 Office Plaza Dr.			1 2: 54
	NEW Registered Office Address:			-
	Suite A			
	Tallahassee, FL	32301		
the cha agent v was/we	imited liability company is not organized under the lavenage or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited like ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the registered office a ability company, it is left the limited liability	and the business office of hereby confirmed that the company or as otherwis	of the registered ne change(s)
	. Roy Cacciatore, Esq.	▼	iatore, Esq.Autho	
Signa	ture of a member or authorized representative of a member		Printed or typed name of sign	ice

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.

Signature of Registered Agent Mackenzie Hart, Asst. Secretary