

L21000 171 906

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

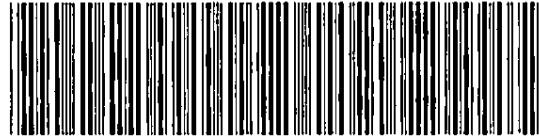
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500389473425

FILED

RECEIVED

2022 JUN 20 AM 9:30

2022 JUN 20 AM 11:27

SECRETARY OF STATE
TALLAHASSEE, FL.

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

A. BUTLER
JUN 21 2022

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

ACCOUNT NO. : I20000000195

REFERENCE : 731048 4332382

AUTHORIZATION

COST LIMIT : \$ 25.00

ORDER DATE : June 8, 2022

ORDER TIME : 10:34 AM

ORDER NO. : 731048-033

CUSTOMER NO: 4332382

CHANGE OF AGENT

NAME: CBN 17 LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker -- 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. Name of the limited liability company: <u>CBN 17 LLC</u>	
2. (a) <u>MAURA A. ZISKA, KOCHMAN & ZISKA PLC</u> Principal office address of limited liability company: <i>(Note: MUST BE STREET ADDRESS)</i> <u>222 LAKEVIEW AVENUE, SUITE 1500</u> <u>WEST PALM BEACH, FL 33401</u>	(b) <u>MAURA A. ZISKA, KOCHMAN & ZISKA PLC</u> Mailing address of limited liability company: <i>(Note: MAY BE POST OFFICE BOX)</i> <u>222 LAKEVIEW AVENUE, SUITE 1500</u> <u>WEST PALM BEACH, FL 33401</u>
3. <u>04/21/2021</u> Date of filing/registration in Florida	4. <u>L21000171906</u> Document number
5. (a) <u>NRAI SERVICES, INC</u> Registered Agent and Registered Office shown on the records of the Florida Dept. of State: <u>1200 SOUTH PINE ISLAND ROAD</u> Registered Office Address <i>(MUST BE FLORIDA STREET ADDRESS)</i> <u>PLANTATION</u> , FL <u>33324</u>	
(b) <u>Enter name of NEW Registered Agent and/or NEW Registered Office address:</u> <u>Corporation Service Company</u> <u>NEW Registered Office Address:</u> <u>1201 Hays Street</u> <u>Tallahassee</u> , FL <u>32301</u>	

FILED
2022 JUN 20 AM 9:30
SECRETARY OF STATE
TALLAHASSEE, FL

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.

<u>Jill C. Cowie</u> Signature of a member or authorized representative of a member	<u>Jill Cilmi, Authorized Person</u> 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.

Grace E. Kirby
Signature of Registered Agent

Grace E. Kirby, Asst. Vice President of Corporation Service Company

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