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Division of Corparations

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(((H22000026918 3)))



H220000269183ABC/

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY (((P122000026918 3)))

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.

Nam	e of the limited liability company: UNION BRASSE	RIE, LLC		
		(b)		
a) _	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)		
	1311 North Westshore Boulevard, Suite 200	A Suite 700		
•	Tampa, FL, 33607			
-	04-29-2021			
-	Date of filing/registration in Florida	- _{4.}	Document number	
(a) _	Registered Agent and Registered Office shown on the records of	at Plands De	nt of State	
1		the Florida De	pt of state.	
	WILLIAM M. STAINTON			
	Registered Office Address	<u>ADDRESS)</u>		
	201 NORTH FRANKLIN STREET, Suite 2000			
	The same of the sa	33602 		
	Tampa, F	<u></u> _	22	
			i :	
(b)	Enter name of NEW Registered Agent and/or NEW Registere	d Office addr	<u></u> 2	
	Enter name of NEW Registered Agent and Office and New Registered Agent and Office and New Registered Agent and Office and New Registered Agent and Ne		· ·	
	Legaline Corporate Services Inc.	_	·	
	5227 SLIMMERT IN COMMONS BLVD. Suite 400			
	3237 30 MARIAN COMM			
	B. Marin	33907		
hange gent	NEW Registered Office Address 5237 SUMMERLIN COMMONS BLVD. Suite 400 Fort Myers Limited liability company is not organized under the le or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited erre authorized by an affirmative vote of the member ticles of organization or the operating agreement of the series	liability con s of the limi se limited li	npany, it is hereby contirmed that the char ted liability company or as otherwise provability company.	
	Autorius Doristo	Anto	nius Desisto Printed or typed name of signee	
Sign	ature of a member or authorized representative of a member		and a sumb south	
l here provis the ol	ature of a member of authorized representative of a member of above accept the appointment as registered agent and a sions of all statutes relative to the proper and completing ations of my position as registered agent as provingly reflect a change in the registered office address, and indexing of this change.	gree to act le performa ded for in C I hereby co	in this capacity. I juriner agree to comply with ince of my duties, and I am familiar with and acc hapter 605, F.S. Or, if this document is being fi infirm that the limited liability company has been	