L21000225644

(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



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DEC 14 2021

XXRPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195
REFERENCE : 321938 7986366
AUTHORIZATION Smell Renan
COST LIMIT : \$55.0
ORDER DATE : December 13, 2021 ORDER TIME : 3:0 PM
ORDER NO. : 321938-005
CUSTOMER NO: 7986366
CHANGE OF AGENT
NAME: 1818 SE10 STREET LLC
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
XX CERTIFIED COPY PLAIN STAMPED COPY
CONTACT PERSON: Eyliena Baker EXT#

EXAMINER: _____

COVER LETTER

	Registration Section Division of Corporations						
SUBJEC	1818 SE 10 Street LLC						
)	Name of Limited Liability Company					
Dear Sir	or Madam:						
The encl	osed Registered Agent/Registered	Office Change and	fee(s) are submitted for filing.				
Please re	turn all correspondence concerning	g this matter to the	following:				
Seth Col	hen						
	Name of Person						
1818 SE	10 Street LLC						
	Firm/Company						
1002 E N	Newport Center Drive, Suite 200						
	Address						
Deerfield	i Beach, FL 33442						
	City/State and Zip Cod	le	<u> </u>				
KLEVER	RETTE@INSURANCECAREDIREC	ст.сом					
E-n	nail address: (to be used for future	annual report notif	fication)				
For furth	er information concerning this mat	ter, please call:					
KIM LEV	ERETTE	919 at (618-7011				
	Name of Person		Area Code & Daytime Telephone Number				
Б П Р	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Suite 810 Tallahassee. FL 32303				
F	Enclosed is a check for the follow	ing amount:					
	S25 Filing Fee		.55 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.

2. (a) 1002 E. NEWPORT CENTER DRIVE Principal office address of limited liability company: (b) 1002 E. NEWPORT CENTER DRIVE Mailing address of limited liability company:	1. Na	ame of the limited liability company: $\frac{18}{1}$	318 SE 10 Stree	et LLC		
Principal office address of limited liability company: (Nate: MIST BE STREET ADDRESS) DEERFIELD BEACH, FL 33442 DEERFIELD BEACH, FL 33442 5/18/2021 L21000225644 3. Date of filing/registration in Florida 4. Document number COGENCY GLOBAL INC. Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 115 NORTH CALHOUN STREET, SUITE 4 Registered Office Address (MIST BE FLORIDA STREET ADDRESS) TALLAHASSEE FL 32301 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: 1201 Hays Street Tallahassee FL 32301 If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that a change or changes are made, the Florida street address of the registered office and the business office of the registered under the laws of the state of Florida, it is hereby confirmed that a change or changes are made, the Florida street address of the registered office and the business office of the registered under the laws of the face of Florida, it is hereby confirmed that the change applies of organization or the operating agreement of the limited liability company or as otherwise providing agreement of the limited liability company or as otherwise providing agreement of the limited liability company. Seth Cohen				(b)	1002 E. N	NEWPORT CENTER DRIVE
5/18/2021 Date of filing/registration in Florida Document number COGENCY GLOBAL INC. Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 115 NORTH CALHOUN STREET, SUITE 4 Registered Office Address (MUST BE FLORIDA STREET ADDRESS) TALLAHASSEE FL 32301 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: Corporation Service Company NEW Registered Office Address: 1201 Hays Street Tallahassee FL 32301 f the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that the change or changes are made, the Florida street address of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change application or the operating agreement of the limited liability company or as otherwise providing agreement of the limited liability company. Seth Cohen	. ()	•		_ (3)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
Date of filing/registration in Florida 4. Document number COGENCY GLOBAL INC. Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 115 NORTH CALHOUN STREET, SUITE 4 Registered Office Address (MUST BE FLORIDA STREET ADDRESS) TALLAHASSEE FLORIDA STREET ADDRESS) TALLAHASSEE FL. 32301 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: Corporation Service Company NEW Registered Office Address: 1201 Hays Street Tallahassee FL. 32301 f the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that a hange or changes are made, the Florida street address of the registered office and the business office of the registe gent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change assists of the state of Florida in the change of the minuted liability company or as otherwise providing agreement of the limited liability company or as otherwise providing agreement of the limited liability company or as otherwise providing agreement of the limited liability company or as otherwise providing agreement of the limited liability company. Seth Cohen		DEERFIELD BEACH, FL 33442		_	DEERFIE	LD BEACH, FL 33442
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organities of a memorized representative of a memori rinned or typed name of signee	577A7	4AC28F34F5		Seth	Cohen	
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply w	-	·		a to and I	u thio aco	

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.

Signatury of Registered Agent