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Office Use Only



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COVER LETTER

| TO: | Registration Section Division of Corporations | | | | | |
|---|--|--------------------|--|--|--|--|
| | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | , | • | | | |
| SUBJ | RIVER LOFTS PARK LLC ECT: | | | | | |
| | N | ame of Limited L | iability Company | | | |
| Dear S | Sir or Madam: | | | | | |
| The e | nclosed Registered Agent/Registered C | Office Change and | fee(s) are submitted for filing. | | | |
| Please | return all correspondence concerning | this matter to the | following: | | | |
| Eyal S | аріг | | | | | |
| | Name of Person | | | | | |
| RIVEI | R LOFTS PARK LLC | | | | | |
| | Firm/Company | | | | | |
| 500 S | W 3rd Ave | | | | | |
| | Address | | _ | | | |
| Fort L | auderdale, Fl 33315 | | | | | |
| | City/State and Zip Code | | | | | |
| Eyal@ | imodernodev.com | | | | | |
| | E-mail address: (to be used for future a | nnual report notif | ication) | | | |
| For fu | rther information concerning this matte | er, please call: | | | | |
| Eyal S | apir | 410 at (| 917-7760 | | | |
| | Name of Person | | Area Code & Daytime Telephone Number | | | |
| | 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 | | | |
| Enclosed is a check for the following amount: | | | | | | |
| \$25 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.

| 1. N | fame of the limited liability company: RIVER LOFTS P | PARK L | LC | | | |
|---|---|--|---|---|--|--|
| 2. (a) | 500 SW 3rd Ave | | (b) 500 SW 3rd Ave | | | |
| () | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | _ | . , | | ss of limited liability company: Y BE POST OFFICE BOX) | |
| | Fort Lauderdale, FL 33315 | | Fort Laude | erdale, FL 33. | 315 | |
| | | | | ···· | | |
| | 05/18/2021 | | L210002297 | 776 | | |
| 3. | Date of filing/registration in Florida | 4. | | Document | number | |
| 5. (a | DIFIORE, CHRISTINE M. | | | | | |
| `, | Registered Agent and Registered Office shown on the records of 14201 W. SUNRISE BLVD. | the Flori | da Dept. of Stat | - c : | | |
| | egistered Office Address (MUST BE FLORIDA STREET ADDRESS) UITE 201 | | | _ | 2022 OCT SECRET | |
| | Sunrise | 33323 | | _ | T 26 | |
| | Dee Chopyak Enter name of NEW Registered Agent and/or NEW Registered Office address: | | | _ | M 9: 03 | |
| | 330 SE 3rd Place | | | | | |
| | NEW Registered Office Address: | | | _ | | |
| | Deerfield Beach , FI | 33441 | | _ | | |
| chang agent was/w | limited liability company is not organized under the lave or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liavere authorized by an affirmative vote of the members of cicles of organization or the operating agreement of the | registe ability of of the li | red office and company, it is mited liability | d the busine s hereby con v company (| ss office of the registered firmed that the change(s) | |
| | D/2 | | Dor | on | Broman ped name of signee | |
| | ature of a member or authorized representative of a member | | | ,, | | |
| I here provis the ob to mer notifte | by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I have writing of this change. | ree to ac perform d for in hereby c | et in this cape nance of my d Chapter 605 confirm that t | acity. I furth luties, and I , F.S. Or, if the limited I | her agree to comply with the am familiar with and accept this document is being filed iability company has been | |
| |) | | | | | |
| Signati | ure of Registered Agent | | | | | |