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COVER LETTER

TO: Registration Section Division of Corporations	•
SUBJECT: Ahletes Propert	LLC Enability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change an	d fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the	e following:
Myssa Maleur Name of Person Athletes Property Firm/Company 101 Drickel Ave Solk Tour Address Miani FL 33131 City/State and Zip Code Myss D the Acuity team = E-mail address: (to be used for future annual report not	- gt Fi
For further information concerning this matter, please call:	
Alyse plooley at (614)	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 XT.	of the limited liability company:	'C Ya	operta	LLC		
: 1	D 1 11 1		4 3	1/01 8 2	kell Ave	
2. (a) <u>[</u>	Principal office address of limited liability company:	_ (b)	Mai	-1* 5	imited liability compa	nv:
	(Note: MUST BE STREET ADDRESS)				POST OFFICE BOX	
	South face of FC		South	TOWER	8K Floo	,
	Mian: FC 33131		Mjan	, Fl	33131	
	G/17/21		1210	00028	2422	
3.	Date of filing/registration in Florida	4.	De	ocument num	ber	
5. (a)	DIANA SPANO					
	stered Agent and Registered Office shown on the records of the	e Florida D	Dept. of State:			
;	101 Brickell Ave					
Reg	istered Office Address (MUST BE FLORIDA STREET AL	DRESS)			202	
··	South TOWER 8th Floor				2021 SEP	•
	Milani , FL	33i3	3 (ا ن ا	
(b)	Alasse McCauley	•			PH	ر ا المناش
Ente	r name of NEW Registered Agent and/or NEW Registered O	ffice addr	ess:		ယ်	• 1222
	1101 Brickell Ave				03	
<u>NE'</u>	W Registered Office Address:	1.00				
	Mrajur , FL_	331	31			
change or cagent will be was/were at the arrisles Signature of the reby according to merely renotified in the colling of the	ed liability company is not organized under the laws changes are made, the Florida street address of the respective identical. Or, in the case of a Florida limited liab uthorized by an affirmative vote of the members of of organization or the operating agreement of the limited depresentative of a member companies of all statutes relative to the proper and complete persons of my position as registered agent as provided in the registered office address, I he writing of this change.	egistered ility com the limit mited lia	office and the pany, it is he ded liability comparting this capacitant this capacitant.	he business of ereby confirm ompany or as iny. Finited or typed not be a further of the confirmation of t	ed that the change otherwise provide ame of signee	red e(s) ed in