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Division of Corporations

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From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803 Fax Number : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC REGISTERED AGENT CHANGE SQUARE FINANCIAL PROPERTY HOLDINGS LLC

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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	ame of the limited liability company: <u>SQUARE FI</u>	<u>INANCIA</u>	L PROPE	ERTY HOLDING	SLLC
2. (a)	Principal office address of limited hability company: (Note: MUST BE STREET ADDRESS)	(b)		Hailing address of limit	• • •
	7901 4th St N STE 14536		7901 4th	n St N STE 1450	36
	St. Petersburg, FL 33702		St. Pete	rsburg, FL 3370)2
	06/29/2021		L210003		
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	MYRTIL, MACKENSON				
(,	Registered Agent and Registered Office shown on the records o	f the Florida	Dept. of State	: ::	
	2902 SE 1ST PLACE				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS		•	
			,		
	BOYNTON BEACH , F	ı <u> 33435</u>		•	
(E.)	Northwest Registered Agent LLC				202
(b)	Enter name of NEW Registered Agent and/or NEW Registere	ed Office adc	iress:		2023 HAY -2
					· 🔻 📑
	7901 4th St N				-2 EX
	NEW Registered Office Address:		•		3
	STE 200				
	STE 300				ب د
	St. Petersburg , F	33702			
	ot. i ctersourg	1,00102			
the cha agent was/w	imited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited l ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the regis liability co: of the limi	tered office mpany, it is ited liability	and the business of thereby confirmed y company or as otl	office of the registere that the change(s)
11	THE SWINTHY	Nat	Smith		
Signa	nure of a member or authorized representative of a member			Printed or typed name	of signee
provis the ob- to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as providely reflect a change in the registered office address, I d'in writing of this change.	jree to act e performa ed for in C I hereby co	in this cape ince of my c hapter 605 infirm that i	acity. I further agr duties, and I am far , F.S. Or, if this do the limited liability	ec to comply with th niliar with and acce ocument is being file company has been
Signan	Taylor Newman - Assistant Secreta	ry			