La1000401075

(Requestor's Name)							
(Address)							
(Address)							
(1000000)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
Special instructions to 1 imig Officer.							

Office Use Only



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COVER LETTER

	Registration Section Division of Gorporations		,				
SUBJEC	MT MIAMI LLC						
OCDOLC		Name of Limited Liability Company					
Dear Sir	or Madam:						
The encl	osed Registered Agent/Registered	Office Change and	I fee(s) are submitted for filing.				
Please re	turn all correspondence concerning	g this matter to the	following:				
RANDY	ROSA, ESQ.						
	Name of Person		<u> </u>				
GOLDM	AN & ROSA, P.A.						
	Firm/Company						
320 SE 18	TH STREET						
-	Address						
FORT LA	UDERDALE FL 33316						
	City/State and Zip Coc	le	<u> </u>				
mbrealest	ateproperties.com						
È-n	iail address: (to be used for future	annual report notif	lication)				
For furth	er information concerning this mat	tter, please call:					
RANDY	ROSA, ESQ.	954 at (565-4311				
·	Name of Person	\	Area Code & Daytime Telephone Number				
7 .1 9	Aailing Address: Registration Section Division of Corporations 2.O. Box 6327 Fallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
E	inclosed is a check for the follow	ing amount:					
	■ \$25 Filing Fee						

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. 1	Name of the limited liability company: MT MIAMI LLC	·. -	<u> </u>	
)		1)	
(t.e	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)		Mailing addres	s of limited liability company: **BE POST OFFICE BOX**)
	701 Brickell Key Blvd, Unit 909		701 Brickell Key Blvd,	Unit 909
	Miami, FL 33131		Miami, FL 33131	
	09-09-2021		L21000401075	
3.	Date of filing/registration in Florida	4.	Document i	number
5. (:				
J. (t	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of State;	
	LAW OFFICES OF ISAAC BENMERGUL P.A.			
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	<u></u>	
	10800 BISCAYNE BLVD., SUITE 650			
	NORTH MIAMI BEACH . FI	33160 L		22
				7231
(b				HA!
	Enter name of NEW Registered Agent and/or NEW Registered	d Office ad	<u>dress</u> :	63
	GOLDMAN & ROSA, P.A.			2023 HAY -8 PM 4:56
	NEW Registered Office Address:			
	320 SE 18TH STREET			96
	FORT LAUDERDALE FI	L <u>33316</u> L		
chang agent was/v the ar Sign I her provide the ofe notific	limited liability company is not organized under the large or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the fature of a member or authorized representative of a member serve accept the appointment as registered agent and agricultures of all statutes relative to the proper and complete obligations of my position as registered agent as provide rely reflect a change in the registered office address, I seed in writing of this change.	e registere ability co of the lim e limited l ree to act performe d for in C hereby co	ed office and the busines mpany, it is hereby conted liability company capability company. And Printed or type in this capacity. I furthence of my duties, and I chapter 605, F.S. Or, if onfirm that the limited here.	ss office of the registered afrimed that the change(s) or as otherwise provided in the change of the complex with the change of the complex with the change of the company has been still the company has been
Signa	ture of Registered Agent		J	/

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00