121000419415

	(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:	
		SEP 10 TOZA

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2024 SEP -9 PH 12:27



115 N CALHOUN S.T., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088 If there are any issues please contact Patrice at 850-202-9071

Date:09	0/09/2024	
	Patrice Rush	
	2492882	_
	SHI - LA	KE OSBORNE, LLC
	of Incorporation/Authorizat	
Amendm	ent	
✓ Change	of Agent	
Reinstate	ement	
Conversi	on	
Merger		
☐ Dissoluti	on/Withdrawal	
Fictitious	Name	
Other		
Authorized Amo	ount: \$25.00	
Signature:	(Part)	

F: 800.944.6607



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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088 If there are any issues please contact Patrice at 850-202-9071

Date:	03/03/2024	
Name:	Patrice Rush	_
Reference #:	2492882	<u> </u>
Entity Name:	SHI - LAK	E OSBORNE, LLC
Article	es of Incorporation/Authorizatio	n to Transact Business
☐ Amen	dment	
Change Ch	ge of Agent	
Reins	tatement	
☐ Conve	ersion	
Merge	er	
☐ Dissol	ution/Withdrawal	
Fictition	ous Name	
Other_		
Authorized A	mount: \$25.00	
Signature:	(Past//	

F: +852.2682.9790

COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJ	ECT:	SHI - LAK	E OSB	ORNE, LLC	
	Na	me of Lir	nited Li	iability Company	
Dear :	Sir or Madam:				
The e	nclosed Registered Agent/Registered O	ffice Char	ige and	fee(s) are submitted	for filing.
Please	e return all correspondence concerning t	his matter	to the	following:	
	Patrick Kellner				
	Name of Person			_	
	Cogency Global Inc.				
	Firm/Company				
	600 Wilshire Blvd Suite 980	0			
	Address				
	Los Angeles, CA 90017				
	City/State and Zip Code				
	talia.haywood@ledgcapital.c			 . ,	
	E-mail address: (to be used for future ar	inual repo	rt notifi	ication)	
For fu	orther information concerning this matte	r, please o	call:		
	Patrick Kellner	at (888) 60	00-9540
	Name of Person	w. (_		Area Code & Dayt	ime Telephone Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		Reg Div P.C	ailing ADDRESS gistration Section vision of Corporation D. Box 6327 Ilahassee, Florida 32.	os
	Enclosed is a check for the following	ig amoun	t:		
	■ \$25 Filing Fee		□ \$5	55 Filing Fee & Certi	fied Copy

INHS18 (2/14)

TO:

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) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 2220 Lake Worth Road Lake Worth, FL 33461 Lake Worth, FL 33461 1. Lake Worth, FL 33461 3. Date of filling/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Kellner, Patrick Registered Office Address: (b) Cogency Global Inc. Fil. 32301 (c) File T name of NEW Registered Agent and/or NEW Registered Office address: (c) NEW Registered Office Address: (d) Fil. 32301 (e) Cogency Global Inc. Fil. 32301 (f) File Limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited of the proper of operating one of michagine of michagine of the provisio	1. N	ame of the limited liability company:	SHI - L	AKE OSBORNE, LLC
Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS) 2220 Lake Worth Road Lake Worth, FL 33461 Lake Worth, FL 33461 Lake Worth, FL 33461 Segistered Agent and Registered Office shown on the records of the Florida Dept. of State: Kellner, Patrick Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 115 North Calhoun Street Suite 4 Tallahasse FL 32301 (b) Cogency Global Inc. Enter name of NEW Registered Agent and/or NEW Registered Office address: SEW Registered Office Address: (c) SEW Registered Office Address: (d) FL SEW Registered Office Address: SEW Registered Office Addr	2 (a)		(b)	
Lake Worth, FL 33461 9/22/2021 L21000419415 3. Date of filing/registration in Florida	(-)	Principal office address of limited liability company:		Mailing address of limited liability company:
3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Kellner, Patrick Registered Office Address (NUST BE FLORIDA STREET ADDRESS) 115 North Calhoun Street Suite 4 Tallahasse FL 32301 (b) Cogency Global Inc. Enter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Office Address: FL 32301 (b) Inc. Enter name of NEW Registered Agent and/or NEW Registered Office address: FL STATE ADDRESS: NEW Registered Office Address: If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company or as otherwise provided in the articles of a member or authorized representative of a member Frietd or typed name of signee Thereby 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 jamiliar with and accept the abhiguitions of my position as registered agent as provided for in Chapte 60.5. F.S. Or, if his document is being filed to merety reflect a change in the registered agent as provided for in Chapte 60.5. F.S. Or, if his document is being filed to merety reflect a change in the registered agent as provided for in Chapte 60.5. F.S. Or, if his document is being filed to merety reflect a change in the registered agent as provided for in Chapte 60.5. F.S. Or, if his document is being filed to merety reflect a change in th		2220 Lake Worth Road		2220 Lake Worth Road
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Kellner, Patrick Registered Office Address 115 North Calhoun Street Suite 4 Tallahasse FL. 32301 (b) Cogency Global Inc. Enter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Office Address: NEW Registered Office Address: FL. If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Is Jacob Levy Signature of a member or authorized representative of a member Printed or typed name of signee Thereby 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.	3.	Date of filing/registration in Florida	4.	Document number
Kellner, Patrick Registered Office Address 115 North Calhoun Street Suite 4 Tallahasse FL. 32301 (b) Cogency Global Inc. Enter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Office Address: NEW Registered Office Address: FL. If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Is Jacob Levy Signature of a member or authorized representative of a member Printed or typed name of signee Thereby 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.	5. (a))		
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Tallahasse FL 32301 (b) Cogency Global Inc. Enter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Office Address: FL				
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(b) Cogency Global Inc. Enter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Office Address: NEW Registered Office Address: FL_ SEW Registered Office Address: NEW Registered Office		Tallahasse , FL	32301	
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Patrick Kellner Asst Secretary	provis the ob to mer potifie	ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide elv reflect a change in the registered office address, I i d in writing of this change	performance of d for in Chapte hereby confirm	of my duties, and I am Jamiliar with and accept or 605, F.S. Or. if this document is being filed that the limited liability company has been
Signature of Registered Agent	_ •	Patrick Keiner, Asst. Secretary		