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Division of Corporations

Fax Number

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From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone

: (307)200-2803

Fax Number

: (813)436-5206

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## LLC REGISTERED AGENT CHANGE CBI REAL ESTATE LLC

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K. SALY

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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: CBI REAL ESTA	TE LLC					
2. (a)	6801 Lake Worth Road	(b) 6801 Lak	(b) 6801 Lake Worth Road				
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)					
	Ste. 342	Ste. 342					
	Greenacres FL 33467 US	Greenacres FL 33467 US					
2	10/05/2021  Date of filing/registration in Florida	<u>L21000435</u>					
3.		4.	Document number				
5. (a)	Jaramillo, Victor M.						
	Registered Agent and Registered Office shown on the records of	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:					
	6801 Lake Worth Road	- 2					
	Registered Office Address (MUST BE FLORIDA STREET	77 27 7					
	Suite 342		ME 27 PA				
	Greenacres , F1	_ 33467	ASS				
(b)	Northwest Registered Agent LLC Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address:	PILL PH 5: 23 RECANASSI FI FI DAID				
	7901 4th St N						
	NEW Registered Office Address:		_				
	STE 300		<b></b>				
	St. Petersburg , FI	_ 33702					
	St. Fetersburg , Fr		_				
the cha agent was/w	imited liability company is not organized under the large or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	f the registered offic ability company, it of the limited liabilit	ce and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in				
_//	ture of a member or authorized representative of a member	Nat Smith					
Signa	iture of a member or authorized representative of a member		Printed or typed name of signee				
provis the ob- to mer notifig	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 provide ely reflect a change in the registered office address, I d in writing of this change.	rce to act in this cap performance of my d for in Chapter 60, hereby confirm that	pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been				
r- /V~	7,00,000	Secretary					
Signati	ire of Registered Agent						