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2021 NOV 15 AM 6: 29 SECRETARY OF STATE

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COVER LETTER A STATE OF THE STA

TO:		tration Section on of Corporations	•		•				
SUBJI	ECT:	CT: 307 ATLANTIC PROMOTER LLC Name of Limited Liability Company							
	_								
Dear S	Sir or M	adam:							
The en	closed	Registered Agent/Registered Of	fice Change a	and fe	e(s) are submitted for filing.				
Please	return a	all correspondence concerning t	his matter to t	the fol	lowing:				
IAN LU	UDMIR								
_		Name of Person			-				
		Firm/Company			-				
2980 N	E 20711	4 STREET, SUITE 608							
		Address			-				
AVEN	TURA, I	FL 33180							
		City/State and Zip Code			-				
ian@ia	ınludmir.	com							
- F	E-mail a	ddress: (to be used for future an	nual report n	otifica	tion)				
For fur	rther inf	ormation concerning this matte	r, please call:						
IAN LU	UDMIR		305 at (614-3100				
		Name of Person			Area Code & Daytime Telephone Number				
	Regis Divis P.O. I	ng Address: tration Section ion of Corporations Box 6327 nassee, FL 32314			Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
	Enclo	nclosed 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.	Na	me of the limited liability company: 307 ATLANTIC I	PROMO	ТС	ER LLC	
2	(a)			/h)	
	(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	, o	Mailing address of limi	ited liability company:
		2980 NE 207TH STREET, SUITE 608			2980 NE 207TH STREET, SU	ITE 608
		AVENTURA, FL 33180	_		AVENTURA, FL 33180	
		10/27/2021		ı	L21000467677	
3.		Date of filing/registration in Florida	4.	-	Document number	г
5.	(a)					
		Registered Agent and Registered Office shown on the records of IAN LUDMIR	he Flori	ida	Dept. of State:	
		Registered Office Address (MUST BE FLORIDA STREET A	DDRE	SS		دم
		18660 COLLINS AVENUE, SUTE 107		SEG		
		SUNNY ISLES BEACH, FL	33160	-		THE ED WESTELL SECRETARY OF STATE
	4.5					形
	(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office	o de	dross.	SER E
		Since many or the state of the	Connec :	aut	urcas.	5. 7. S. 7.
		IAN LUDMIR				沿台 6
		NEW Registered Office Address:			 _	
		2980 NE 207TH STREET, SUITE 608				
		AVENTURA	22100			
		FL., FL	33180			
cha age wa	ange ent v s/wo	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia cre authorized by an affirmative oute of the members of cles of organization or the operating agreement of the	registe bility of f the li limited	ere cor imi Hi	d office and the business offic mpany, it is hereby confirmed ited liability company or as of	ce of the registered that the change(s)
	ignat	ure of a member of author and to sentative of a member	-		Printed or typed name	e of signee
I he to a not	nerel ovisi obli mere tified	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I have in writing of this change.	ee to a perfori I for in ereby	ct i ma i Ci coi	in this capacity. I further our	ree to comply with the