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Division of Corporations

Fax Number : (850)617-6383

From:

Email Address:____

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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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. Na	me of the limited liability company:	
2. (a)	525 SOUTH FLAGLER DRIVE	(b) 525 SOUTH FLAGLER DRIVE
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) SUITE 201	Mailing address of limited hability company: (Note: MAY BE POST OFFICE BOX) SUITE 201
	WEST PALM BEACH, FL 33401	WEST PALM BEACH, FL 33401
	11/30/2021	L21000507737
 (a) 	Date of filing/registration in Florida Ward, Nathan	4. Document number
	Registered Agent and Registered Office shown on the records of 525 S Flagter Dr Registered Office Address (MUST BE FLORIDA STREET)	202
	West Palm Beach , FL	33401 A Office address:
(b) <u>-</u>	Enter name of NEW Registered Agent and/or NEW Registered Corporate Creations Network Inc. NEW Registered Office Address:	1 Office address:
	North Palm Beach , FL	33408
nange i igent wi vas/we:	nited liability company is not organized under the law or changes are made, the Florida street address of the Il be identical. Or, in the case of a Florida limited lia	as of the State of Florida, it is hereby confirmed that after the registered office and the business office of the registered ability company, it is hereby confirmed that the change(s) of the limited liability company or as otherwise provided in
0.	Mr.	Ariana Turoski, Attorney-in-fact
l hereby rovision he oblig o merel otified (re of a member of authorized representative of a member of accept the appointment as registered agent and agrees of all statutes relative to the proper and complete pations of my position as registered agent as provided y reflect a change in the registered office address, I have been acceptable to the change. By: Atlana Turoski, Special Secretary of Registered Agent	Printed or typed name of signee ee to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and accept I for in Chapter 605, F.S. Or, if this document is being filed tereby confirm that the limited liability company has been