La1000530693

	(Requestor's Name)	
	(Address)	
·	(Address)	
	(City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL MAIL
<u></u>	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of S	Status
Special Instructions to	Filing Officer:	
	ich (Change

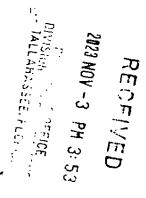
Office Use Only



500418403515

S. Chiarini





CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

CONTACT PERSON: Eyliena Baker -- EXT#

		ACCOUNT	NO. :	I20000	000195	
		REFERE	NCE :	110210	8432187	
		AUTHORIZAT	ION :			
		COST LI	MIT :	\$ 25/.0	0	
		November 3, :	2023		W. Kindo	٠
		2:50 PM				
ORDER I	Ю. :	110210-011				
CUSTOM	ER NO:	8432187				
		<u>CHANGE</u>	OF AGE	 <u>NT</u>		
	NAME:	407 PLAZA	HOLDI	NG LLC		
PLEASE		THE FOLLOWING	G AS P	ROOF OF	FILING:	
XX	PLAIN	STAMPED COPY				

EXAMINER:

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	ame of the limited liability company: 407 PLA	ZA HOLDING LLC		
	,	(b)		
2. (a)	Principal office address of limited liability comp (Note: MUST BE STREET ADDRESS)	any:	Mailing address of limit (Note: MAY BE PO	• • •
	2201 SW 145th Ave., Suite 201	220	1 SW 145th Ave., Suite 2	201
	Miramar, FL 33027	Mira	amar, FL 33027	
	12/21/2021	L21(000530693	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)				
5. (a)	Registered Agent and Registered Office shown on the re		of State:	20; SE
	Ness, Eliyahu			ACC SE
	Registered Office Address (MUST BE FLORIDA S	TREET ADDRESS)		2023 NOV -3 SECRETARY
	2201 SW 145th Ave Suite 201		į	ASS &
	Miramar	, FL33027		V-3 PH
		,		D I:57
(b)				m 7
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Re</u>	egistered Office address:		
	Corporation Service Company			
	NEW Registered Office Address:			
	1201 Hays Street			
	Tallahassee	32301		
		, t [.] L		
change agent v was/we	imited liability company is not organized under or changes are made, the Florida street address will be identical. Or, in the case of a Florida linguiser are authorized by an affirmative vote of the mer cles of organization or the operating agreement	s of the registered off nited liability compan nbers of the limited I	ce and the business office y, it is hereby confirmed ability company or as off	e of the registered that the change(s)
	/s/ Chanie Chriqui	Chanie C	hriqui, Manager	
	ture of a member or authorized representative of a membe	r	Printed or typed name	of signee
provisi the obl to mere	by accept the appointment as registered agent a ons of all statutes relative to the proper and con igations of my position as registered agent as p ely reflect a change in the registered office add I in writing of this change.	mplete performance o	f my duties, and I am fan	niliar with and accept
	Drace C-Kuble	GRACE E	KIRBY, ASST. VICE P	RESIDENT
Signatu	re of Registered Agent			