Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000000442 3)))



H226806304423ABCO

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

the control of the co

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FL CORPORATE & TAX SERVICES, LLC

Account Number: I20210000164 Phone : (786)901-8500 Fax Number : (786)783-0010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: EL1115@ not. com

		LLC REGISTERED AG ENBH PROPERT	TES LLC	SEC TALLY	2022	
<u> </u>	<u>, 21,</u>	Certificate of Status	0	HAS	<u> </u>	لئــ
٠ <u>٠</u>	- <u>₹</u>	Certified Copy	0	썾켙	-	
T	-	Page Count	01		P	Ö
ī.	_	Estimated Charge	\$25.00	07. 4.S	ن	
<u></u>		And the second s	entrocententententententententententententente	RID.	=	
JAN	<u> </u>			₽>	-	
23			15 has a 1 has 15 has 1 has 1			

Electronic Filing Menu Corporate Filing Menu

Help

COVER LETTER

TO: Registration Section Division of Corporations											
SUBJECT: ENGH PROPERTIES Name of	Limited Liability Company										
Dear Sir or Madam:											
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.											
Please return all correspondence concerning this matter to the following:											
Name of Person											
FL CORPORATE & TAX SERVICES, U											
135 SAN LOCANZO AVENUE, SUITE 760 Address											
Coral cables, Fl. 3314 to City/State and Zip Code											
AFARIAG ACF - LAW. COM E-mail address: (to be used for future annual report notification)											
For further information concerning this matter, please	call:										
Alexander 1. Fana are	186 1901 - 05CO										
Name of Person	Area Code & Daytime Telephone Number										
Mailing Address:	Street Address:										
Registration Section	Registration Section										
Division of Corporations	Division of Corporations										
P.O. Box 6327	The Centre of Tallahassee										
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303										
Enclosed is a check for the following amount:											
□ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy										
INHS18 (2/14)											

H220000004423

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.

 Name of the limited liability company: 	NBH	PROPERT	IES LLC		>+4\- 	
2. (a) Principal office address of limited liability con (Note: MUST BE STREET ADDRES)	mpany:	(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX.				
17301 BISCAYNE BIND #18	306		301 Bis co	RUIT BI	vd# 1808	
NOITH MIAMI, R 33160			an Men	·		
12/2//2021	•		000 634	159		
3. Date of filing/registration in Florida		4.	Document	number		
S. (a) ASOUTO CARDALIO FORIA P.I Registered Agent and Registered Office shown on the I Registered Office Address IMUST BE FLORIDA.	records of the	DRESS)	State:	VA TAKE	21	
COYAL GARCS (b) Enter name of NEW Registered Agent and/or NEW R.	, FL <u>3</u>	314Y		2022 JAN -4 PH 2: 15 SECT OF STATE ALLAHASSEE, FLORID		
FL CORPORATE & TAX SERVI	ices, L	.LC	·····	SIAIL FLORIDA	x ?? -5	
136 San lorgy 20 Avenue	<u> </u>	c 760	******			
coral Gables	, FL3	3146	*****			
If the limited liability company is not organized under change or changes are made, the Florida street address agent will be identical. Or, in the case of a Florida lim was/were authorized by an affirmative vote of the mention articles of organization or the operating agreement	s of the regi- nited liability nbers of the	stered office a y company, it limited liabil	ind the business is hereby confi- lity company or	office of the	c registered	
Signalitie of a friember or authorized representative of a member		ELLIO	Printed or typed	N		
I hereby accept the appointment as registered agent as provisions of all statutes felasive to the proper and com the obligations of my position as registered agent as pr to merely reflect a change in the registered office addressified in writing of this change. Signature of Registered Agent		1 :				
Signature of Kogistered Agent						