## Florida Department of State 54250 Division of Corporations 54250

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To:

Division of Corporations

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From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

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

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## LLC REGISTERED AGENT CHANGE MARINE LANDINGS, LLC

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K. Brumbley

JUN 1 6 2022

## 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	lame of the limited liability company:	MARINE LANDINGS, LLC			
2. (a)	12895 SW 132ND ST	(b)	12895 SW 132ND	ST	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(*)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)		
	MiAMI, FL 33186		MIAMI, FL 331	36	
7	02/11/2022		L22000054250		
3.	Date of filing/registration in Florida	4,	Document number		
5. (a)					
	Registered Agent and Registered Office shown on the records of	f the Florida Dept. (	of State:		
	1201 HAYS STREET				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS			
			· · · · · · · · · · · · · · · · · · ·	202	
	TALLAHASSEE	32301-25		7022 JUN 16	
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(b) .	Corporate Creations Network	Inc.	•	- 6 正登	
	Enter name of NEW Registered Agent and/or NEW Registered	d Office address:		P 50	
	•		<u></u> .	· <del>i.</del>	
	801 US Highway 1			03	
	NEW Registered Office Address:			· ω	
			<del></del>		
	North Palm Beach FI	33408			
nange igent v vas/we he arti	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 tre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registered office ability company of the limited lia	e and the business office of it is hereby confirmed that bility company or as otherw	the registered	
	Rachel Joseph		Rachel Joseph, Attorne	y-in-Fact	
	ure of a member or authorized representative of a member	<del>u<u> </u></del>	Printed or typed name of sig	₹	
l herei Provisi he obl o mere otified	by accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address, I h I in writing of this change.	ee to act in this performance of d for in Chapter hereby confirm t	capacity. I further agree to my duties, and I am familian 605, F.S. Or, if this docum that the limited liability comp	comply with the r with and accept ent is being filed pany has been	
<u>Cac</u> Signatu	Kal Osseph Rachel Joseph, Special Se	cretary			