## 10000 563 45

(Requestor's Name)								
(Address)								
,								
(Address)								
(City/State/Zip/Phone #)								
PICK-UP WAIT MAIL								
(Durings Estitu Nama)								
(Business Entity Name)								
(Document Number)								
Certified Copies Certificates of Status								
Special Instructions to Filing Officer:								

Office Use Only



800398710278



RECEIVED

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

	ACCOUNT NO.	:	I2000000	0195					
	REFERENCE	:	350633	8282874					
	AUTHORIZATION	:	I No	<i>1</i>					
	COST LIMIT	:	C\$755.00 B	enan					
	January 12, 2023	- <b></b>	<del>5-5</del>						
ORDER TIME :	10:16 AM								
ORDER NO. :	350633-004								
CUSTOMER NO:	8282874								
CHANGE OF AGENT									
NAME:	REALJOY REALT	'Y J	LC						
		- <b>-</b>	. — <del>-</del>						
PLEASE RETURN	THE FOLLOWING AS	PR	OOF OF FII	LING:					
CERTII PLAIN	FIED COPY STAMPED COPY								
CONTACT PERSON	N: Eyliena Baker		EXT#						
			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: REALJOY RE	ALTY LLO	C ——	-						
2. (a)										
()	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			(b)						
	1008 AIRPORT ROAD SUITE F			1008 AIR	PORT ROAD S	UITE F				
	DESTIN, FL 32541		(	DESTIN,	FL 32541					
	02/02/2022		L	2200005	6345					
3.	Date of filing/registration in Florida	4.			Document num	iber				
5. (a)					_					
	Registered Agent and Registered Office shown on the records DWYER, JAKOB	of the Floric	da D	ept, of Stat	e:		- \			
	Registered Office Address (MUST BE FLORIDA STREE	•	-	-::: -:::	2023					
	1008 AIRPORT ROAD SUITE F					121 - (1)	2023 JAN 17			
	DESTIN , FL				_	EM LAHASSI	17	- <del></del>		
					<b>-</b>	0). 13	PH 1: 07	3 8 L		
(b)	Enter name of NEW Registered Agent and/or NEW Register	1.63.000			=	 	<del></del>	The same		
	Enter name of NEW Registered Agent and/or NEW Register	ed Office a	ddre	<u>:80</u> :			70			
	Corporation Service Company									
	NEW Registered Office Address:				_					
	1201 Hays Street	_								
	Tallahassee	32301 FL								
change agent v was/we the arti	imited liability company is not organized under the lor changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members cles of organization or the operating agreement of the	aws of the ne register liability c s of the lin ne limited	red omp nite liab	office and cany, it is d liability con	d the business of thereby confirm y company or as	ffice of t red that t	he regis he chan	tered ge(s)		
^\_	ture of a member or authorized representative of a member				Printed or typed n	ame of sig	nee	<del></del>		
provisi the obl to mere	by accept the appointment as registered agent and a ons of all statules relative to the proper and complet igations of my position as registered agent as provide the reflect a change in the registered office address. I in writing of this change.	gree to ac le perform led for in I hereby c	t in tanc Cha onf	this capa we of my a upter 605 irm that i	acity. I further of luties, and I am , F.S. Or, if this the limited liabi	agree to c familiar s docume lity comp	comply with an ent is being any has	with the d accept ing filed been		
	re of Registered Agent  E. Kirby, Asst. Vice President									

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00