12000/19636

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

Office Use Only



800440556998

2024 DEC 11 PM 12: 27

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Tallhassee, FL 3230 Phone: 850-558-1500

ACCOUNT NO.	:	1200000001	.95					
REFERENCE	:	806777	7736597					
AUTHORIZATION	:		Spiels Cana					
COST LIMIT	:	\$ 25.00						
ORDER DATE : December 3, 2024								
ORDER TIME : 9:28 AM								
ORDER NO. : 806777-005								
CUSTOMER NO: 7736597								
								
CHANGE OF AGENT								
NAME: 308 TAVERNIER	ST	REET LLC						
PLEASE RETURN THE FOLLOWING AS	PR	OOF OF FILI	NG:					
CERTIFIED COPY XX PLAIN STAMPED COPY								
CONTACT PERSON: Amanda Miller		CONTACT PERSON: Amanda Miller 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	une of the limited liability company: 308 TAVERN	NER STREET L	-LC		
2. (a)		(b)			
- ((-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	ce address of limited liability company: Mailing address of limited liabilit			
	200 FLORIDA AVE	20	00 FLORIDA AVE		
	TAVERNIER, FL 33070	TA	AVERNIER, FL 33070		
	03/23/2022	L22	2000119636		
3.	Date of filing/registration in Florida	4.	Document number		
5 (0)					
5. (a)	Registered Agent and Registered Office shown on the records	of the Florida Dept	pt, of State:		
	HAWKS, BRYAN	•			
	Registered Office Address (MUST BE FLORIDA STREE	ET ADDRESS)			
	138 SIMONTON STREET	_	70 Ti		
	KEY WEST	FL 33040	PILED 2024 DEC 11 PM 12: 27 TALLAHASSEE. FLORIDA		
(b)	Enter name of NEW Registered Agent and/or NEW Registe				
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registe</u>	red Office address	2: 2: 2		
	Corporation Service Company		Dr. J		
	NEW Registered Office Address:				
	1201 Hays Street				
	Tallahassee	FL_32301			
change agent v was/we	imited liability company is not organized under the or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the member cles of organization or the operating agreement of the case of organization or the operating agreement of the case of organization or the operating agreement of the case of organization or the operating agreement of the case of organization or the operating agreement of the case of organization or the operating agreement of the case of organization or the operating agreement of the case of organization or the operating agreement of the case of organization or the operating agreement of the case of organization or the operating agreement of the case of the case of the operating agreement of the case of the c	laws of the State the registered of liability compa es of the limited	ffice and the business office of the registered any, it is hereby confirmed that the change(s) I liability company or as otherwise provided in		
/8/ Fe	elix Charney	Felix Ch	narney, Member		
Signat	ure of a member or authorized representative of a member		Printed or typed name of signee		
provision the obli to mere	by accept the appointment as registered agent and a ons of all statutes relative to the proper and comple igations of my position as registered agent as provi ily reflect a change in the registered office address, I in writing of this change.	rte performance	e of my duties, and I am familiar with and accept		
Signatur	Inaca C-Kuble re of Registered Agent	GRACE E. K	KIRBY, ASST. VICE PRESIDENT		