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(((H22000164533 3)))



H220001645333ABC-

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LLC REGISTERED AGENT CHANGE ONE OF ONE REAL ESTATE, LLC Certificate of Status Certified Copy Page Count Estimated Charge

T. LEMIEUX MAY - 9 2022

From:

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\$25.00

## H22000164533,3

## 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	ome of the limited liability company: One of One R	eal Es	tate, LLC	rc	
2	(a)	506 Fleming Street		(b)	5) 506 Fleming Street	
٠.	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(-)	Mailing address of limited liability company: (Note: MAY BF. POST OFFICE BOX)	
		Key West, FL 33040		•	Key West, FL 33040	_
		April 11, 2022		•	L22000150858	<del>-</del>
3.		Date of filing/registration in Florida		4.	Document number	
•	(~)	Cogency Global Inc.				
5.	(a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of Sta  115 North Calhoun Street, Suite 4			a Dept. of State:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				<u>5)</u>	
					·	
		Tallahassee	FL	3230	301	
	(b)	Robert A. Spottswood, Jr.				
	• ,	Enter name of NEW Registered Agent and/or NEW Registe	red O	Tice addi	ddrus: 2022	
					YAH Y	
		506 Fleming Street				
		NEW Registered Office Address:			-6 -6	
					PH 12: 1	
		Key West	FL_	3304	DE TALE	
ch ag	ange gent	imited liability company is not organized under the cor changes are made, the Florida street address of will be identiful. Or, in the case of a Florida limited cro authorized by an affirmative vote of the member interesting agreement of the operating agreement of	the re i liabi rs of t	gistered lity con he limit	e State of Florida, it is hereby confirmed that after the doffice and the business office of the registered ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in	1€
		1 / 000		Robe	bert A. Spottswood, Jr.	_
		ture of a member or authorized representative of a moniber			Printed or typed name of signee	
710	<i></i>	by accept the appointment as registered agent and ions of all statutes relative to the proper and completions of my position as registered agent as proviety reflect a changeful the registered office address d in writing of this grange.	agree ele pe ided fi , I her	to act in rformar or in Ch eby con	t in this capacity. I further agree to comply with the arce of my duties, and I am familiar with and acce, Chapter 603, F.S. Or, if this document is being file onfirm that the limited liability company has been	e pi d
\$	gnan	are of Registered Agent				

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

INHS18 (2/14)