Florida Department of State Divinional Compranions

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

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

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

| Email | Address: | | | | | | |
|-------|----------|--|--|--|--|--|--|
| | | | | | | | |

LLC REGISTERED AGENT CHANGE NORTH CITY FLATLANDS PHASE TWO LLC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | \$25.00 |

Electronic Filing Menu

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Help

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, FloridatStatutes, the undersigned limited Itability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

| 1. N | ame of the limited liability company: NORTH C | CITY FLAT | LANDS PHASE TWO 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 33186 |
| | 04/19/2022 | | L22000163833 |
| 3. | Date of filing/registration in Florida | 4. | Document number |
| 5. (a) | CORPORATION SERVICE COMPANY | | |
| J. (4) | Registered Agent and Registered Office shown on the records 1201 HAYS STREET | of the Florida E | Dept. of State: |
| | Registered Office Address (MUST BE FLORIDA STREE | TADDRESS) | |
| | TALLAHASSEE | FL_32301- | 2525 20 JUL 15 J |
| (b) | Corporate Creations Network Inc. | | |
| (-) | Enter name of NEW Registered Agent and/or NEW Register | red Office addi | |
| | 801 US Highway 1 | | ့ ယ္က |
| | NEW Registered Office Address: | | သ |
| | North Palm Beach | FL 33408 | |
| chang agent was/w | limited liability company is not organized under the e or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member ticles of organization or the operating agreement of the street of the member ticles. | he registered liability com s of the limit | office and the business office of the registered ipany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in |
| | aitlin Lazarus | | lin Lazarus, Attomey-in-Fact |
| Sign | ature of a member or authorized representative of a member | | Printed or typed name of signee |
| the ob to me | eby accept the appointment as registered agent and a sions of all statutes relative to the proper and comple oligations of my position as registered agent as provi rely reflect a change in the registered office address, ed in writing of this change. | igree to act i de performar ded for in Cl I hereby con | n this capacity. I further agree to comply with the ace of my duties, and I am familiar with and accept apter 605, F.S. Or, if this document is being filed afirm that the limited liability company has been |
| | aitlin Lazarus, Special | I Secretary | , |
| Signat | ture of Registered Agent | | |