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Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : COMPUTERSHARE 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.\*\*

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## LLC REGISTERED AGENT CHANGE FOCUSED REALTY GROUP LLC

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K. SALY

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## 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.

I. Na	ime of the limited liability company:	y Group L	LC		
2. (a)	15800 Pines Blvd		(b) 15800 Pines Blvd		
(,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	<del></del>	(•)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Pembroke Pines, FL 33024		Pembro	oke Pines, FL 33024	
	05/03/2022		L220002	209275	
3.	Date of filing/registration in Florida LEGALINC CORPORATE SERVICES INC.	4.		Document number	
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of Sta 476 Riverside Ave.				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			F 11 2024 HAY TALLAHI	
	Jacksonville	, FL_32202		29 P ASSEE	
(b)	Corporate Creations Network Inc.	·-		FILED  LIMAY 29 PM 1: 45  LUMIL ANSSEE, FLORIDA	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> 801 US Highway 1	ered Office	address:	<u> </u>	
	NEW Registered Office Address:				
	North Palm Beach	, FL	}		
hange igent v vas/we	imited liability company is not organized under the or changes are made, the Florida street address of will 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 regist d liability ers of the l	ered office company, imited liab	e and the business office of the registered it is hereby confirmed that the change(s) pility company or as otherwise provided in	
	Kristen Espinales	K	Kristen Espinales, Attorney-in-Fact		
Signa	ture of a member or authorized representative of a member	_		Printed or typed name of signee	
provisi he obl to mere	by accept the appointment as registered agent and ions of all statutes relative to the proper and compl igations of my position as registered agent as prov ely reflect a change in the registered office address d in viriting of this change.	agree to d lete perfor vided for its , I hereby	nct in this commance of in Chapter to confirm the	capacity. I further agree to comply with the my duties, and I am familiar with and accept 605, F.S. Or, if this document is being filed hat the limited liability company has been	

Kristen Espinales Kristen Espinales, Special Secretary

Signature of Registered Agent