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(Requestor's Name)						
(Address)						
(Address)						
(3-6-0-0-0					
(City/State/Zip/Phone #)						
PICK-UP	☐ WAIT ☐ MAIL					
(Bu	usiness Entity Name)					
(Document Number)						
Certified Copies	Certificates of Status					
Special Instructions to Filing Officer:						
	J. HORNE					
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SECRETARY OF STA

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COVER LETTER

Division of Corporations			
SUBJECT: 710 SHORE L. Name o	LC		
Name o	f Limited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this m	atter to the following:		
DAVID PARNES Name of Person			
PANJOS & Co. Firm/Company			
2885 SMFORD AVE. SW Address	(=37(US)		
CRMDVILLE, MI HOLD	118		
DAP @ PARAES - (2) E-mail address: (to be used for future annual	report notification)		
For further information concerning this matter, plea	ase call:		
Name of Person	at (<u>2/2</u>) <u>750 (56 / 0</u> Area Code & Daytime Telephone Number		
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
Enclosed is a check for the following am	ount:		
1 \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy		

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.

. Name of t	he limited liability company: 710 SHORE LLC	: 			
(a) 710 S S	hore Drive		(b) 710 S Shore Drive		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited (Note: MAY BE POS	
Miami	Beach		Miami Bea	ich	
FL 331	180	_	FL 33180		
May 18	3, 2022		1.220002321	72	
	Date of filing/registration in Florida	4.		Document number	SECRE WAS EAST
(a) Nir Ab	outboul				CRECE
(a) Register	red Agent and Registered Office shown on the records of	the Flo	ida Dept. of State	- v:	12 P
3731 N	N Country Club Drive				25 F
Registe	red Office Address (MUST BE FLORIDA STREET	ADDRI	<u>:SS)</u>	-	
Suite 2	2125				-0. 5
Avenu		33180		-	, α
	, FI	•		-	
(b)	Gal Yosef me of NEW Registered Agent and/or NEW Registered	l Office	address:	-	
710 S	Shore Drive				
NEW F	Registered Office Address:			-	
Minne	Beach	22190	 -	-	
viianu 	FI	_33180 ~		<u>-</u>	
ange or char ent will be i is/were auth	iability company is not organized under the langes are made, the Florida street address of the dentical. Or, in the case of a Florida limited literated by an affirmative vote of the members organization or the operating agreement of the	regist ability of the l limite	ered office and company, it is imited liability	d the business office is hereby confirmed the y company or as othe ipany.	of the registered nat the change(s)
ignature of a r	member or authorized representative of a member	<u>.</u>	-	Printed or typed name of	of signee
ovisions of à 2 obligation: merely refle	pt the appointment as registered agent and agi all statutes relative to the proper and complete is of my position as registered agent as provide act a change in the registered office address. I ting of this change.	ree to o perfor d for it hereby	uct in this cape mance of my a n Chapter 605 confirm that t	wity I further acres	e to comply with th
enature of Ree	istered Agent				