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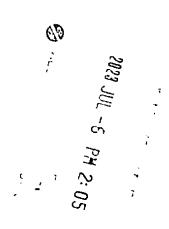
(Requestor's Name)						
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PICK-UF	WAIT MAIL					
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NAME: CORAL BAY REALTY HOLDINGS LLC

TYPE OF FILING: CHANGE OF RA

COST:

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AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO:

Registration Section
Division of Corporations

CORAL BAY REALTY HOLDINGS, LLC SUBJECT: Name of 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 matter to the following: Name of Person Firm/Company Address City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Area Code & Daytime Telephone Number Name of Person Mailing Address: **Street Address:** Registration Section Registration Section Division of Corporations **Division of Corporations** P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 Enclosed is a check for the following amount: □ \$25 Filing Fee □ \$55 Filing Fee & Certified Copy INHS18 (2/14)

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	ame of the limited liability company: CORAL BAY REA	ALTY .	HC	DLDINGS,	LLC
2.	(a)		_ ((b)		
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			1	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		600 W GREGORY ST			600 W GR	EGORY ST
		PENSACOLA, FL 32502	<u>-</u> _		PENSACO	DLA, FL 32502
		08/10/2022		I	.220003502	281
3.		Date of filing/registration in Florida	4.	_		Document number
5	(a)					
٠.	(4)	Registered Agent and Registered Office shown on the records of the PLATINUM AGENT SERVICES LLC	nc Florid	da l	Dept, of Stat	_ e:
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				-
		155 OFFICE PLAZA DRIVE				~2
		TALLAHASSEE , FL	32301			NOW JUL-6
	(b) Enter name of NEW Registered Agent and/or NEW Registered Of			fice address:		-
		DBO Services LLC				
		NEW Registered Office Address:				清州
		155 OFFICE PLAZA DR.				-
		TALLAHASSEE , FL	32301			_
ch ag wa	ange ent v is/we	imited liability company is not organized under the law or changes are made, the Florida street address of the revill be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the la	egister oility c the lir	rec on mit	l office and npany, it is ted liability	d the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in
_		m Zytman	Sai	m	Zytman	
	_	ture of a member or authorized representative of a member				Printed or typed name of signee
pre the to	ovisi e obl mere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I he d'in writing of this change.	e to ac erforn for in creby c	ct i nar Cl con	n this cape nce of my c napter 605 nfirm that i	acity. I further agree to comply with the duties, and I am familiar with and accept , F.S. Or, if this document is being filed the limited liability company has been
		Devorah Glazer				
Si	gnatu	re of Registered Agent				