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From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

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

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-		
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LLC REGISTERED AGENT CHANGE THE REAL TITLE GREAT LAKES, LLC

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M. SOLOMON

MAY - 1 2023

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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.

1. No	ame of the limited liability company:THE REAL TITL	E GREA	AT LAKES, LI	LC		
2. (a)	400 NW 26 ST	(b) 400 NW 26	5 ST		
- ((- /	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`	*	dailing address of limited (Note: MAY BE POST	-	
	MIAMI, FL 33127		MIAMI, FL	. 33127		
	09/19/2022	_	L2200(4091	45		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)	DALY, SEAN					
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 400 NW 26 ST		:		2023 /	
	MIAMI , FL	33127			TASSET TIGHT	2023 APR 28
(0)	Corporate Creations Network Inc.			4 0 F		
	Enter name of NEW Registered Agent and/or NEW Registered Office address:				STAIL Gara.	盘!::12
	NEW Registered Office Address:					
	801 US Highway 1					
	North Palm Beach , FL	33408				
change agent v was/we	imited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia- ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	register shility co of the lin	ed office and ompany, it is nited liability	the business office chereby confirmed the company or as other	of the regist at the chan	tered ge(s)
A	h The			ki, Attomey-in-fact		
Signa	ture of a member or authorized representative of a member	-		Printed or typed name of	Signee	
provisi the obl to mer	by accept the appointment as registered agent and agri ions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address, I h d'in writing of this change.	ve to ac perform I for in vereby c	t in this capa ance of my d Chapter 605, onfirm that th	city. I further agree uties, and I am Jamil. F.S. Or, if this docu he limited liability co	to comply iar with an iment is bein impany has	with the d accept ng filed been
h	By: Ariana Turoski, Special Secretary re of Registered Agent					
Signatu	re of Registered Agent					