

L22000453184

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

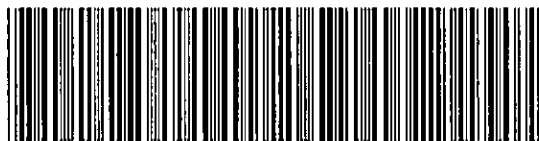
(Business Entity Name)

(Document Number)

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600396613056

FILED

2022 OCT 27 AM 10:07

SECRETARY OF STATE  
TALLAHASSEE, FL

2022 OCT 27 PM 3:30

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 082815 7986366

AUTHORIZATION :



COST LIMIT : \$ 25.00

ORDER DATE : October 27, 2022

ORDER TIME : 2:25 PM

ORDER NO. : 082815-005

CUSTOMER NO: 7986366

CHANGE OF AGENT

NAME: HARBOR DRIVE ONE LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Elyliena Baker -- EXT#

EXAMINER: \_\_\_\_\_

**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. Name of the limited liability company: Harbor Drive One LLC
2. (a) 1002 EAST NEWPORT CENTER DRIVE  
Principal office address of limited liability company:  
*(Note: **MUST BE STREET ADDRESS**)*  
SUITE 200  
DEERFIELD BEACH, FL 33442
- (b) 1002 EAST NEWPORT CENTER DRIVE  
Mailing address of limited liability company:  
*(Note: **MAY BE POST OFFICE BOX**)*  
SUITE 200  
DEERFIELD BEACH, FL 33442
3. 10/20/2022 Date of filing/registration in Florida
4. L22000453184 Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
GARVER, TINA

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

1002 EAST NEWPORT CENTER DRIVE SUITE 200

DEERFIELD BEACH, FL 33442

- (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

Corporation Service Company

**NEW** Registered Office Address:

1201 Hays Street

Tallahassee, FL 32301

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

X Signature of a member or authorized representative of a member

SKETH COHEN  
Printed or typed name of signee

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314  
FILING FEE: \$25.00

FILED  
2022 OCT 27 AM 10:07  
STATE OF FLORIDA  
TALLAHASSEE, FL