L22000490984

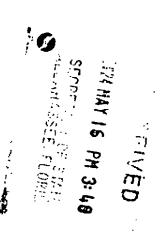
	(Re	questor's Name)	
	(Ad	dress)	
	(Ād	dress)	
			
	(Cit	y/State/Zip/Phon	ie #)
	PICK-UP	☐ WAIT	MAIL
	(Bu:	siness Entity Na	me)
	(Do	cument Number)
Certified Cop	ies	_ Certificate	s of Status
Special Ins	tructions to f	Filing Officer:	

Office Use Only



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2024 HAY 16 ANTI: 19





To: Department Of State, Division Of Corporations From: Amanda Miller - Amanda.Miller@cscglobal.com

Ext:

Date: 05/16/24 Order #: 1505681-1

Re: MIAMI FLOATING OFFICE, LLC

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Change of Registered Agent and Office

reistle sen

Check in the amount of: \$25.00 - FL State Account Number: I20000000195

AUTH,

Please take the following action:

File on a routine basis Issue proof of filing

Return evidence to the following:

ATTN: Amanda Miller

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

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	me of the limited liability company: MIAMI FLOA	TING OFFI	CE, LLC			
2. (a)		(1	o)			
Σ. (α)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	10201 E BAY HARBOR DRIVE #203		10201 E BAY HARBOR DRIVE #203			
	BAY HARBOR ISLANDS, FL 33154		BAY H	ARBOR ISLANDS, FL 33154		
	11/16/2022		L220004	190984		
3.	Date of filing/registration in Florida	4.	 -	Document number		
5. (a)						
J. (4)	Registered Agent and Registered Office shown on the records	of the Florida	Dept. of S			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 10201 E BAY HARBOR DRIVE #203		TALL T			
	BAY HARBOR ISLANDS	FL_33154				
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> . Corporation Service Company	red Office ad	dress:	TALLAHASSEE FLORIDA		
	NEW Registered Office Address:					
	1201 Hays Street					
	Tallahassee	FL_32301				
change agent w was/we	imited liability company is not organized under the or changes are made, the Florida street address of table vill be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the member cles of organization or the operating agreement of t	the registere Hiability co rs of the lim	ed office mpany, i ited liab	and the business office of the registered t is hereby confirmed that the change(s) ility company or as otherwise provided in		
/s/ M	/s/ Mollie C. Turnier			Mollie C. Turnier		
Signat	Signature of a member or authorized representative of a member		Printed or typed name of signee			
provision the oblication to the object to the transfer of the	by accept the appointment as registered agent and a ons of all statutes relative to the proper and comple igations of my position as registered agent as provi by reflect a change in the registered office address, I in writing of this change.	igree to act de performa ded for in C I hereby co	in this co mee of n Thapter 6 onfirm th	apacity. I further agree to comply with the w duties, and I am familiar with and accept 05, F.S. Or, if this document is being filed at the limited liability company has been		

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

Signature of Registered Agent