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LLC REGISTERED AGENT CHANGE CR XYZ LLC

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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. N	ame of the limited liability company: CR XYZ LLC				
2. (a)	3841 NE 2 AVENUE	(1	(b) 3841 NE 2 AVENUE		
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(Mailing address of limited (Note: MAYBE POST	
	SUITE 400		SUITE 400)	
	MIAMI, FL 33137		MIAMI, FI	L 33137	
	11/21/2022		L220004967	220	
3.	Date of filing/registration in Florida ROBINS, CRAIG	4.	-	Document number	
4	Registered Agent and Registered Office shown on the records of 3841 NE 2 AVENUE	f the Florid	a Dept. of State	- ::	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) SUITE 400				
	MIAMI , FI	33137		•	2024
	C T Corporation System				2024 APR 10
	Enter name of NEW Registered Agent and/or NEW Registered	I Office nd	dress:	•	PH
	NEW Registered Office Address:				կ։ 2
	1200 South Pine Island Road				, <u></u>
	Plantation	33324			
the ch agent was/w the ar	limited liability company is not organized under the larange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	ws of the fine region the limited	stered office ompany, it is nited liability	and the business off shereby confirmed the y company or as othe spany.	fice of the registered nat the change(s)
	ature of a member or authorized representative of a member		,	Printed or typed name o	f signee
provis the ob to me	thy accept the appointment as registered agent and age tions of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address, I ad in writing of this change. CT Corporation System Authan Pridan	ree to ac e perforn ed for in hereby c	t in this capa aance of my c Chapter 605 onfirm that t	aciw. I further agree duties, and I am fami 5, F.S. Or, if this doct the limited liability co	to comply with the liar with and accept ument is being filed ompany has been
Signat	me of Registered Agent, Natalie Pickens, Assistant Secretary				

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