Florida Department of State Division of Corporations Electronic Flong Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : FILE RIGHT LLC Account Number : I20170000091 Phone : (718)878-5811 Fax Number : (718)732-4580

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	

PERSONAL IN PLOT OF THE PROPERTIONS VISION STATES AND THE PROPERTIONS AND THE PROPERTIES AND THE

LLC REGISTERED AGENT CHANGE GOLDEN SHORES APT LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

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COVER LETTER

H24000126107 3

TO:	Registration Section Division of Corporations	·					
SUBJ	SUBJECT: GOLDEN SHORES APT LLC Name of Limited Liability Company						
Dear S	ir or Madam:						
The en	closed Registered Agent/Registered Office Change	and fee(s) are submitted for filing.					
Please	return all correspondence concerning this matter to	o the following:					
Mark I	· Fuchs						
	Name of Person						
File Ri	ight RA Services, LLC						
	Firm/Company						
1425 3	7th Street, Suite 201						
	Address						
Brook	lyn, NY 11218						
	City/State and Zip Code	······································					
agent@	gfileacorp.com						
Ĩ	E-mail address: (to be used for future annual report	notification)					
For further information concerning this matter, please call:							
Sara R	ingel 718	878-5811					
	Name of Person	Area Code & Daytime Telephone Number					
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					

■ \$25 Filing Fee INHS18 (2/14)

Enclosed is a check for the following amount:

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: GOLDEN	SHORES	S APT LLC
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) BROOKLYN, NY 11219	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	INCOME IN THE TEST		
3.	8/30/2022	<u> </u>	L22000378194
	Date of filing/registration in Florida	4.	Document number
5. (a)	Business Filing Incorporated		
. ,	Registered Agent and Registered Office shown on the records of	the Florida Dept	of State:
	1200 South Pine Island Rd, Plantation, FL 33326		
	Registered Office Address (MUST BE FLORIDA STREET)	2024	
			2024 APR
			R -5
		 	
(b)	File Right RA Services, LLC		ĒĠ
(4)	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	MI 8: 03
	625 E Twiggs Street, Ste. 110		
	NEW Registered Office Address:		
	Tampa, FL 33602		
chang agent was/v	limited liability company is not organized under the lave or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liavere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	registered of ability compa of the limited	fice and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in
/s/ Mark Fuchs		Mark Fuchs, Authorized Person	
_	ature of a member or authorized representative of a member		Printed or typed name of signee
provis the ob to me	eby accept the appointment as registered agent and agr sions of all statutes relative to the proper and complete digations of my position as registered agent as provide rely reflect a change in the registered office address, I i ted in writing of this change.	ree to act in the performance of for in Chap thereby confir	nis capacity. I further agree to comply with the of my duties, and I am familiar with and accept ter 605, F.S. Or, if this document is being filed in that the limited liability company has been
/\$/	Mark Fuchs		
Signat	ure of Registered Agent		