

L23 0000 37219

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

(Document Number)

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MADEIRA SURFERS

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2023 MAY 25 PM 3:53

FLORIDA CAPITAL COURIER SERVICES, INC

2330 CLARE DRIVE

TALLAHASSEE, FL 32309

(850) 524-5437

(850) 524-6243

Please use funds from this account: I20210000160: \$25.00

Authorization Signature: *Jan Telle* :

36, LLC

L23000037219

BUSINESS NAME DOCUMENT #

Certified Copy

Certificate of Status

TALLAHASSEE, FL
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NEW FILINGS

- Profit Corp
- Not for Profit
- Limited Liability
- Domestication
- Other
- CORP
- LLLP

AMMENDMENTS

- Amendment
- Resignation of R.A. Officer/Director
- Change of Registered Agent**
- Revocation of Dissolution
- Merger
- Articles of Conversion
- Amended and restated Articles
- Statement of Authority

OTHER FILINGS

- Annual Report
- Fictitious Name
- APOSTILLE
- Country

REGISTRATION/QUALIFICATIONS

- Foreign filing
- Limited Partnership
- Reinstatement
- Other

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 36, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sandra Z. Green, esq.
Name of Person

JONATHAN H. GREEN & ASSOCIATES, P.A.
Firm/Company

901 Ponce de Leon Boulevard, Suite 601
Address

Coral Gables, Florida 33134
City/State and Zip Code

szg@jhglaw.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sandra Z. Green at (305) 372-5100
Name of Person Area Code & Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

- \$25 Filing Fee
- \$55 Filing Fee & Certified Copy

INHS18 (2/14)

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2023 MAY 25 AM 10:05
TALLAHASSEE, FL
DIVISION OF CORPORATIONS

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: 36, LLC

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
382 NW 191 Street Suite 31904
MIAMI, FL 33179-3899

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
382 NW 191 Street Suite 31904
MIAMI, FL 33179-3899

3. 01/26/2023
Date of filing/registration in Florida

4. L23000037219
Document number

5. (a) JONATHAN H. GREEN & ASSOCIATES, P.A.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*
901 PONCE DE LEON BOULEVARD, SUITE 601
Coral Gables, FL 33134

(b) NATHAN W. RICH
Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:
382 NW 191 Street Suite 31904
Miami, FL 33179-3899

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 TALLAHASSEE, FL
 STATE SECRETARY

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.

[Signature]
 Signature of a member or authorized representative of a member

Sandra Z. Green, Esq.
 Printed or typed name of signer

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]
 Signature of Registered Agent

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