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(Rec	questor's Name)			
(Add	dress)			
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(City	//State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
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SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: <u>Delancy Management + Developement LLC</u> 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:				
Brent D. Delaney Name of Person				
Delaney Management & Development LLC Firm/Company				
16900 N. Bay Rd. Ste. 1001 Address				
Sunny Isles, FL 33 160 City/State and Zip Code				
TODY Bear 63 @ 9 Mail. com E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Brent D. Delaney at (954) 709-5602. Name of Person Area Code & Daytime Telephone Number				
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810				

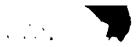
Tallahassee, FL 32303

\$55 Filing Fee & Certified Copy

INHS18 (2/14)

□ \$25 Filing Fee

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.

l. Na	Name of the limited liability company:	igement (Devel	openent L	
	<u> </u>	(b) 6900 N Bay. Ste. 1001 Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	Sunny Isles Fla. 33160 S.	unny Isles Fl	33160	
3.	Date of filing/registration in Florida 4.	2300008 29 18 Document number		
5. (a)	\mathbb{R}^{-1}	<u> </u>		
	11D South east 6th street 17 Fl Registered Office Address MUST BE FLORIDA STREET ADDRESS	00r		
	Ft Landardale Fla		20	
(1.)	, FL,	<u> 201</u>	3F08ET/	
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:	 	FIL FIL	
	16900 N. Bay. Rd. Ste 1001 NEW Registered Office Address:		ED STATE	
	Sunny Isles		5 5 m	
	, FL 3316	<u>0</u>		
change agent w was/we	limited liability company is not organized under the laws of the State ge or changes are made, the Florida street address of the registered off will be identical. Or, in the case of a Florida limited liability companyore authorized by an affirmative vote of the members of the limited liticles of organization or the operating agreement of the limited liability of the li	ice and the business office only, it is hereby confirmed the lability company or as other ty company.	of the registered at the change(s)	
Signat	Brend Discovery Brend Brender of a member or authorized representative of a member	Printed or typed name of	signee	
provisi the obli to mere	eby accept the appointment as registered agent and agree to act in the sions of all statutes relative to the proper and complete performance of bligations of my position as registered agent as provided for in Chapterely reflect a change in the registered office address, I hereby confirmed in writing of this change.	is capacity. I further agree of my duties, and I am famil er 605, F.S. Or, if this docu n that the limited liability co	to comply with the liar with and accept iment is being filed ompany has been	
Signatur	ture of Registered Agent			