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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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Email	Address:			

LLC REGISTERED AGENT CHANGE THE REAL OPEN ESCROW HOLDING COMPANY, LLĆ

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MAY 0 1 2023 K. Brumbi#y

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 N	ame of the limited liability company:	THE REAL OPEN F	SCROW HOLD	NG COMPANY, LLC
2. (a)	400 NW 26 ST		(b) 400 NW	26 ST
2. 100)	Principal office address of limited hab (Note: MUST BE STREET AL	offity company:	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	MIAMI, FL 33127		MIAMI,	FL 33127
	03/09/2023		L2300012	4571
3.	Date of filing/registration in	Florida	4.	Document number
5. (a)	DALY, SEAN			
.). (a.	Registered Agent and Registered Office show	ile:		
	Registered Office Address (MUST BE FL) 400 NW 26 ST	_		
(D)	MIAMI	, FL 33	1127	-
	Corporate Creations Network Inc	2023		
	Enter name of NEW Registered Agent and/o	2023 AF &		
				28
	NEW Registered Office Address:			
	801 US Highway 1			
			· · · · · · · · · · · · · · · · · · ·	_
	North Palm Beach	, FL	408	
chang- agent was/w the art	e or changes are made, the Florida stree will be identical. Or, in the case of a Fl vere authorized by an affirmative vote o ticles of organization or the operating a	et address of the reg lorida limited liabil If the members of tl	gistered office a lity company, it he limited liabili nited liability co	is hereby confirmed that the change(s) ty company or as otherwise provided in mpany.
	An File	f - m m h	Ariana Tur	oski, Attorney-in-fact
I here provis the ob to mer notifie	ions of all statutes relative to the prope ligations of my position as registered a rely reflect a change in the registered of ed in writing of this change.	d agent and agree er and complete per gent as provided fo fice address, I hero	rformance of my	Printed or typed name of signee pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
	By: Ariana Turoski, S	pecial Secretary		

Signature of Registered Agent