

L23000464578

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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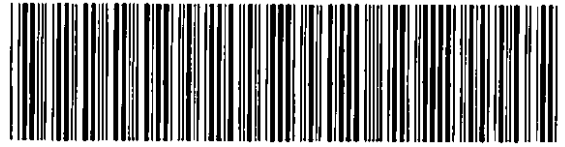
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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OCT 23 2023

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2023 OCT 20 AM 9:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CT CORP
(850) 656-4724
3558 lakesore Drive
Tallahassee, FL 32312

Date: 10/20/2023

Acc#I20160000072

en: c DW

Name:	COFO Miami LLC
Document #:	
Order #:	15181298 - 1

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
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Amount: \$ **25.00**

Thank you!

**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: COFO Miami LLC

2. (a) _____ Principal office address of limited liability company: <i>(Note: MUST BE STREET ADDRESS)</i> <u>5500 ISLAND ESTATES DRIVE 908N</u> <u>AVENTURA, FL 33160</u>	(b) _____ Mailing address of limited liability company: <i>(Note: MAY BE POST OFFICE BOX)</i> <u>5500 ISLAND ESTATES DRIVE 908N</u> <u>AVENTURA, FL 33160</u>
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3. <u>10/09/2023</u> Date of filing/registration in Florida	4. <u>L23000464578</u> Document number
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5. (a) CT CORPORATION SYSTEM
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*
1438 ARROWHEAD DRIVE
MAUMEE, FL 43537

2023 OCT 10 PM 7:51


(b) CT Corporation System

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Office Address:
1200 South Pine Island Road

Plantation, FL 33324

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 of a member or authorized representative of a member

Dominic J. Spinazze

Printed or typed name of signee

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.

By: CT Corporation System /s/Laura R. Broderick, Assistant Secretary

Signature of Registered Agent

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