13000467048

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
Lumils							

Office Use Only



500424625775

1966年,1966年,1968年(1966年)

2021 -1 0: 20

COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJE	CEMA CR PROPERTIES. LLC						
	Name of Limited Liability Company						
Dear S	ir or Madam:						
The en	closed Registered Agent/Registered Office C	hange and fee(s) are submitted for filing.					
Please	return all correspondence concerning this ma	tter to the following:					
Avri Be	en-Hamo, Esq.						
	Name of Person						
Ben-Ha	amo Law, PLLC						
	Firm/Company						
6001 B	roken Sound Parkway NW, Suite 416						
	Address						
Boca R	aton, FL 33487						
	City/State and Zip Code						
katie@	freshwaterelectric.com						
Ē	-mail address: (to be used for future annual re	eport notification)					
For fur	ther information concerning this matter, please	sc call:					
Avri Be	en-Hamo at	561 372-9091					
	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 amo	unt:					
	■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy					

INHS18 (2/14)

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.	Na	me of the limited liability company: CEMA CR PROI	PERTIE	S, 1	LC	
2. (a)			(b)		
`	, .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(-)	Mailin	ng address of limited liability company: te: MAY BE POST OFFICE BOX
		15135 75TH LANE NORTH			15135 75TH LA	ANE NORTH
		LOXAHATCHEE, FL 33470	<u> </u>		LOXAHATCH	EE, FL 33470
		10/10/2023		ı	.23000467048	
3.		Date of filing/registration in Florida	4.	_	Doc	ument number
5. ((a)	Ben-Hamo Law, PLLC				
		Registered Agent and Registered Office shown on the records of	the Flori	da I	Dept. of State:	
						217
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				71711
		2701 NW 2nd Ave., Suite 207				:
		Boca Raton	33431			,
(b)			·			•
	L١	BEN-HAMO LAW, PLLC				
()		Enter name of NEW Registered Agent and/or NEW Registered Office address:			ress:	23
		-				
		NEW Registered Office Address:	-			
		6001 Broken Sound Parkway NW, Suite 416				
		Boca Raton , FL	_33487 			
char agen was/	ige it w we:	mited liability company is not organized under the lay or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited liar e authorized by an affirmative vote of the members of the organization or the operating agreement of the	registe ability of of the li	red on mit	office and the pany, it is here ed liability con	business office of the registered by confirmed that the change(s) appany or as otherwise provided in
<u>(</u> 0			Ka	the	rine Freshwater	
Sig	nah	are of a member or authorized representative of a member			Print	ed or typed name of signee
prov the c to m	nsic bli ere	y accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address, I is in writing of this change.	ee to ac perforn I for in iereby c	et in ear Ch eor	n this capacity. ice of my duties apter 605, F.S. firm that the liv	I further agree to comply with the s, and I am familiar with and accept Or, if this document is being filed mited liability company has been
	_					