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DEC 0.7 S. PRATHER

COVER LETTER

Registration Section): Division of Corporations LA MARE REGENCY 804 LLC UBJECT: ____ Name of Limited Liability Company lear 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: DMITRIY MELESHKO Name of Person Firm/Company 425 HUEHL RD BLDG 4 B Address NORTHBROOK, IL 60062 City/State and Zip Code CPA@GELTONLINE.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: DMITRIY MELESHKO 847 279-8448 Name of Person Mailing Address: Street Address: Registration Section Registration Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 Enclosed is a check for the following amount:

☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

■ \$25 Filing Fee

TATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

ursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company bmits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Na	ame of the limited liability company: LA MARE REC					 -		
. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 10301 EAST BAY HARBOR DRIVE		(b)		Adding address of limited liability company: (Note: MAY BE POST OFFICE BON) ST BAY HARBOR DRIVE			
	BAY HARBOR, FL 33154		BAY HARBOR, FL 33154					
	09/11/2024		ı,	24000397:	586			
3. 5. (a)	Date of filing/registration in Florida ALEX TROYANOVSKY	4.	-		Document num	her _	1	
(,	Registered Agent and Registered Office shown on the records of	e:						
	Registered Office Address <u>(MUST BE FLORIDA STREE)</u> 18101 COLLINS AVENUE, UNIT 4809	T <u>ADDRE</u>	<u>SS)</u>		-		 	2694 1.
	SUNNY ISLES BEACH	33160			_			
(b)	ALEX TROYANOVSKY							<u> </u>
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :				_		:	7: ; n
	NEW Registered Office Address:				_			
	10301 EAST BAY HARBOR DRIVE				_			
	BAY HARBOR	L_33154			_			
change agent v was/wo	imited liability company is not organized under the light or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited light ere authorized by an affirmative vote of the members cless of organization or the operating agreement of the	ic registe liability of of the li	ered com mite	office and pany, it is ed liabilit	d the business o s hereby confirn y company or as	ffice of t ned that t	he regist he chan:	tered ge(s)
	MANNELL	Α.	LEX	TROYA	NOVSKY			. -
I herel provisi the obli to mere notified	thre of a member of authorized representative of a member by accept the appointment as registered agent and as ons of sit statutes relative to the proper and completigations of my position as registered agent as providely reflect a change in the registered office address, it is writing of this change.	gree to a e perfori ed for in t hereby	ct ir man cCh conj	this cape ce of my c apter 603 firm that	Printed or typed of acity. I further adules, and I am 5, F.S. Or, if this the limited liabi	wree to	comply	with the d accept ing filed heen