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FILED
2025 JAN 15 PHI2: 10

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 01/15/2025	_				≈WALK IN**
ENTITY NAME Water	vay 3 LLC				
DOCUMENT NUMBER_					
	PLEASE FILE	THE ATTACK	FED AND RETUR	W	
xxxxxxxx	Plaix Copy				
	Certified Copy Certificate of Statu	េវ			
*:	PLEASE OBTAIN THE	F FOLLOWING	FOR THE ABOVE	E ENTITY**	
	Certified Copy of A Certificate of Good		eats		
	APOSTILLE'/	/ NOTARIAL	CERTIFICATIO	DN	
COUNTRY OF DESTINA NUMBER OF CERTIFICA	_		<u> </u>		
TOTAL OWED \$25.00				1: 120160000072 R F/V	2
Please call Tina at i	the above number fo	or any issue	_		much!

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.

2 (.)		(b	
2. (a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	1031 SEASPRAY AVENUE		1031 SEASPRAY AVENUE
	DELRAY BEACH, FL 33483		DELRAY BEACH, FL 33483
	11/12/2024		L24000475707
3.	Date of filing/registration in Florida	4.	Document number
5. (a)			
J. (u)	Registered Agent and Registered Office shown on the reco	rds of the Florida	Dept. of State:
	CT CORPORATION SYSTEM		
	Registered Office Address (MUST BE FLORIDA STR	REET ADDRESS	2
	1200 SOUTH PINE ISLAND ROAD		
	PLANTATION	, FL ³³³²⁴	D25 JAN 15 PH 12: 11
		_, rL	
(b)			
(-)	Enter name of NEW Registered Agent and/or NEW Regi		dress:
	n ' d.A		10 H
	Registered Agents Inc		
	NEW Registered Office Address:		•
	7901 4th St N STE 300		
	St. Petersburg	_, FL_33702	
change agent v was/we the arti	or changes are made, the Florida street address of the identical. Or, in the case of a Florida limit	of the registere ted liability con bers of the limited li	State of Florida, it is hereby confirmed that after the ed office and the business office of the registered ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in liability company. holas D. Cortezi II
	ture of a member or authorized representative of a member		Printed or typed name of signee
l herei provisi the obl to mere	L. annual the annuintment of registered agent on	d agree to act plete performa ovided for in C xx, I hereby co	in this capacity. I further agree to comply with the ance of my duties, and I am familiar with and accep Chapter 605, F.S. Or, if this document is being filed onfirm that the limited liability company has been

Assistant Secretary of Registered Agents Inc

/s/ David Roberts

Signature of Registered Agent