12/2/22, 11:24 AM

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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	To:				2022 DEC -2		
	Division of Corporations Fax Number : (850)617-6383						
	From:  Account Name : C T CORPORATION SYSTEM  Account Number : FCA000000023  Phone : (954)208-0845  Fax Number : (614)573-3996						
	<pre>**Enter the email address for this business entity to be used for future     annual report mailings. Enter only one email address please.**</pre>						
	Ema	il Address:			<del></del>		
1 <u>-</u>	<u></u>	LLC REC	GISTERED AGE	NT CHANGE			
	CRIMSON LION JUPITER, LLC						
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Corporate Filing Menu

Help

Electronic Filing Menu

• Page: 3¥13

## 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. Na	me of the limited liability company: CRIMSON LION	JUPITER, LLC			
2. (a)	31 St. James Ave	(b) 31 St. James Ave			
2. (11)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		failing address of finited liability company: (Note: MAY BE POST OFFICE BOX)		
	Suite 740	Suite 740			
	Boston, MA 02116 Bos		A 02116		
	01/26/2007 M0700		000503		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	CORPORATION SERVICE COMPANY				
(07	Registered Agent and Registered Office shown on the records of t 1201 HAYS STREET	- c. -			
	Registered Office Address (MUST BE FLORIDA STREET A	<b>⊳</b>			
	TALLAHASSEE , FL.	32301-2525	2022 OEC -		
	C T Corporation System		-2 Jan		
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	AHII: 2		
	NEW Registered Office Address:	·	<b>~</b> •		
	1200 South Pine Island Road		_		
	Plantation, F1.	33324	_		
the cha agent v was/wo	imited liability company is not organized under the lawinge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited his ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the registered office ability company, it is the limited liability continuited liability	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in inpany.		
Claus	ture of a member or authorized representative of a member	JOE DAVIS, MA	Printed or typed name of signee		
I here provisi the obl to mero notified By:	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address, I fel in writing of this change.	neriorman, e at inv	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		