(Requestor's Name)					
(Address)					
(Address)					
(0	City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates of	Status			
Special Instructions to Filing Officer:					
J. HORNE					
OCT - 5 2023					

Office Use Only



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FILED 23 OCT -4 AH 9: 57

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195					
REFERENCE : 019886 8426581					
AUTHORIZATION :					
COST LIMIT : \$ 25.00					
ORDER DATE: September 27, 2023					
ORDER TIME : 10:38 AM					
ORDER NO. : 019886-017					
CUSTOMER NO: 8426581					
<u>CHANGE OF AGENT</u>					
WWD					
NAME: DEL REALTY LLC					
DIRACE DESIGNATION TO A DECOMP OF THE TWO					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY					
CONTACT PERSON: Alexxis Weiland-sorenson					

EXAMINER'S INITIALS:

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.

Nam	ne of the limited liability company:	Y LLC		
2	100 North Ocean Boulevard, #2602	/h		
(a) <u>-</u>	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		"/	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
1	Fort Lauderdale, FL 33305			
0	7/06/2007		M0700000	04065
_	Date of filing/registration in Florida	4.		Document number
(a) _	ncorporating Services, Ltd.			
	egistered Agent and Registered Office shown on the record	s of the Florida	Dept. of Sta	te:
	1540 Glenway Drive			
R	Registered Office Address (MUST BE FLORIDA STRE	ET ADDRESS	2	
				23 OCT -4 AH S
-	Tallahassee	32301		- 0C1
-	i alianassee,	, FL		
1. 3				
(b) <u> </u>	nter name of NEW Registered Agent and/or NEW Registe	ered Office add	dress:	
(Corporation Service Company			58 DA
N	IEW Registered Office Address:			
1	1201 Hays Street			_
٦	Tallahassee	FL_32301		_
nge oi nt wil /were article	ited liability company is not organized under the rechanges are made, the Florida street address of l be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the members of organization or the operating agreement of the second control of the second control of the operating agreement of	laws of the the registere I liability cor rs of the limi the limited li	d office an mpany, it i ited liabilit ability con	Id the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in inpany.
	/s/ Jill Cilmi	Jill Cilmi, Authorized Person Printed or typed name of signec		
ereby vision obliga nerely	accept the appointment as registered agent and a sof all statules relative to the proper and completions of my position as registered agent as proving reflect a change in the registered affice address, writing of this change.	ete performa ided for in C , I hereby co	nce of my hapter 605 nfirm that	acity. I further agree to comply with the
nature o	of Registered Agent	Ami M. C	asper, A	sst. Vice President