## MIO OCCCO 1535

(Re	questor's Name)			
(Address)				
(Address)				
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: May 19, 2021

Order#: 819975-009

Re: BELMONT REAL ESTATE, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

Please take the following action:

XX File in your office on a routine basis.

XX \_\_ Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ami Casper

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

## 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.

I. Na	me of the limited liability company: BELMONT REA	L ESTATE, LLC	
2. (a)	7807 Baymeadows Road East	(b)	
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Suite 205		
	Jacksonville, FL 32256		
	04/01/2010	M10000	001535
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Feldman & Mahoney, P.A.		
()	Registered Agent and Registered Office shown on the records of	the Florida Dept. of S	State:
	2240 Belleair Road, Suite 210		
	Registered Office Address (MUST BE FLORIDA STREET)	<u>ADDRESS)</u>	
		<del></del>	<u> </u>
	Clearwater, FL	33764 	<u></u>
			P
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	_
	Taker hanc or the registred registred and or the registred	· · · · · · · · · · · · · · · · · · ·	· · · <del>_</del>
	Corporation Service Company		
	NEW Registered Office Address:		<del></del>
	1201 Hays Street		
	Tallahassee	32301	
			<del>_</del>
change agent w was/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 authorized by an affirmative vote of the members cales of organization or the operating agreement of the	registered office ability company, i of the limited liabi	and the business office of the registered t is hereby confirmed that the change(s) lifty company or as otherwise provided in
/s/ Ed	ward E. Burr	Edward E. B	urr
Signat	ure of a member or authorized representative of a member		Printed or typed name of signee
provisio he obli to mere		performance of m Lfor in Chapter 6 hereby confirm the forporation Serv	ry duties, and I am familiar with and accept (05, F.S. Or, if this document is being filed at the limited liability company has been