M1300000646Z

(Requestor's Name)				
(Address)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT	MAIL			
(Business Entity Name)				
(Document Number)				
	.			
Certified Copies Certificates of	Status			
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Special Instructions to Filing Officer:				
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Office Use Only



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MAN 2 5 2021 S. YOUNG





CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: December 7, 2020

Order#: 532498-010

Re: ATLANTIS COVE 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: Erika Zavala Daza 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	ame of the limited liability company:	OVE LLC			
2. (a)	1101 NORTH LAKE DRIVE	(b) _	(b) 1101 NORTH LAKE DRIVE		
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0) _	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	LAKEWOOD, NJ 08701		AKEWOOD, NJ 08701		
	10/11/2013	M	13000006462		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	INCORP SERVICES, INC.				
	Registered Agent and Registered Office shown on the records	s of the Florida De	ept, of State:		
	17888 67TH COURT NORTH				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
			202 9 DEC		
	LOXAHATCHEE	33470 FL			
(b)		105 11	PH ::		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	reg Office addre	<u>ස</u> වා		
	Corporation Service Company		£-		
	NEW Registered Office Address:				
	1201 Hays Street				
	Tallahassee	32301			
	,				
change agent v was/w	imited liability company is not organized under the or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of the case.	the registered of I liability comp rs of the limite	office and the business office of the registered pany, it is hereby confirmed that the change(s) and liability company or as otherwise provided in		
	Ž	Jill Cilr	mi, Authorized Person		
Signa	ture of a number or authorized representative of a member		Printed or typed name of signee		
provisi the obl to mer	by accept the appointment as registered agent and cions of all statutes relative to the proper and completigations of my position as registered agent as proviety reflect a change in the registered office address, din writing of this change.	agree to act in ete performanc ided for in Cha , I hereby conf	this capacity. I further agree to comply with the ce of my duties, and I am familiar with and accept apter 605, F.S. Or, if this document is being filed irm that the limited liability company has been		
Sinn	Time, t-Kubi, ure of Registered Agent				
Signatu	ne or westered whent				

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

Grace E. Kirby, Asst. Vice President