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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:				

LLC REGISTERED AGENT CHANGE REGENCY NASSIM LLC

Certificate of Status	0
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Page Count	03
Estimated Charge	\$25.00

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COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: REGENCY NASSIM LLC						
Name of Limited Liability Company						
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Joshua Murphy						
Name of Person						
Registered Agent Solutions, Inc.						
Firm√Company						
Corporate Center One, 5301 Southwest Pkwy, Ste 400						
Address						
Austin, TX 78735						
City/State and Zip Code						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Joshua Murphy 888 705-7274						
Name of Person Area Code & Daytime Telephone Number						
STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations						
Clifton Building P.O. Box 6327						
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301						
Enclosed is a check for the following amount:						
□ \$25 Filing Fee □ \$55 Filing Fee & Certified Copy						

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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.

Na	me of the limited liability company: REGE	NOT INA	SSIM LL	<u>C</u>			
(a)	747 MIDDLE NECK ROADSUITE	_{b)} 747 МID0	DDLE NECK ROADSUITE 101				
()	Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)	y;	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	GREAT NECK, NY 11024	_ 		TNECK			
	4/17/2014	<u> </u>	M14000	002645			
	Date of filing/registration in Florida	4.		Document num	ber		
(a)	BLUMBERGEXCELSIOR CORPORATE	E SERVICE	ES INC				
. (α)	Registered Agent and Registered Office shown on the reco	la Dept. of State:					
	155 OFFICE PLAZA DRIVE1ST F						
	155 OFFICE PLAZA DRIVE1ST F Registered Office Address (MUST BE FLORIDA STR	LOOR	<u>SS)</u>				
		LOOR			٠.	2022	
(b)	Registered Office Address (MUST BE FLORIDA STE	LOOR EET ADDRES , FL 323				2022 JUL 2	; (
(b)	Registered Office Address (MUST BE FLORIDASTE	LOOR EET ADDRES FL 323 C.	01		* - * - * :	22	
(b)	Registered Office Address (MUST BE FLORIDA STE	LOOR EET ADDRES FL 323 C.	01			22	
(b)	Registered Office Address (MUST BE FLORIDASTE TALLAHASSEE Registered Agent Solutions, In Enter name of NEW Registered Agent and/or NEW Registered 155 Office Plaza Dr. NEW Registered Office Address:	LOOR EET ADDRES FL 323 C.	01			2022 JUL 22 AM 11:51	同の
(b)	Registered Office Address (MUST BE FLORIDASTE TALLAHASSEE Registered Agent Solutions, In Enter name of NEW Registered Agent and/or NEW Registered Agent Agent and/or NEW Registered Agent	LOOR EET ADDRES FL 323 C.	01			22 AMII:	

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Matin Hakimi	Matin Hakimi	Manager	
 Signature of a member or authorized representative of a member	Printed or typed name of signee		

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Mackenzie Hart Asst Secretary

Mackenzie Hart, Asst. Secretary
Signature of Registered Agent