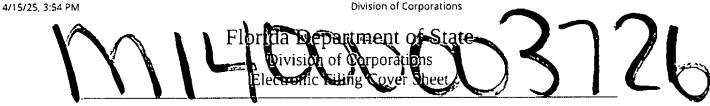
Division of Corporations



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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## LLC REGISTERED AGENT CHANGE BRICKELL SPE, LLC

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Page Count	02
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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.

a) 7901 4th St N		(b) 7901 4th St N	
<b>.</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)
	STE 300	STE 30	0
	St. Petersburg FL 33702	St. Petersburg FL 33702	
	05/30/14	M140000	003726
	Date of filing/registration in Florida	4.	Document number
(a)	Starkman, Mark R.		
	Registered Agent and Registered Office shown on the records of	the Florida Dept. of S	State:
	8950 SOUTHWEST 74TH COURT		
	Registered Office Address (MUST BE FLORIDA STREET.	ADDRESS)	
	SUITE 1901		
	MIAMI	33156	
	, r.	·	<del></del>
b)	Registered Agents Inc		***
	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	
	7901 4th St N		FIL 2025 APR 15
	NEW Registered Office Address:	ー	
	STE 300		ED ED
		-	
	St. Petersburg	33702	<u>Ģ</u> ∓ <b>55</b>
chai it w /we	St. Petersburg mited liability compage or changes are in ill be identical. Or, re authorized by an a	nade, the Florida street address of in the case of a Florida limited li affirmative vote of the members of	any is not organized under the laws of the State of the Florida street address of the registered of in the case of a Florida limited liability company, affirmative vote of the members of the limited liab
nge or changes a fill be identical, re authorized by	are made, the Florida street a Or, in the case of a Florida y an affirmative vote of the n	iddress of limited li nembers o	address of the registered of limited liability company, nembers of the limited liab
eles	s of organization or the operating agreement of the	limited liability of Robin Jones	company.
тап	are of a member or authorized representative of a member	-	Printed or typed name of signee
	y accept the appointment as registered agent and agens of all statutes relative to the proper and complete gations of my position as registered agent as provide by reflect a change in the registered office address. I	ree to act in this c	capacity. I further agree to comply with to my duties, and I am familiar with and acc