M14000007468

(R	Requestor's Name)			
Α)	Address)			
(A	Address)			
(C	City/State/Zip/Phone #)			
PłCK-UP	WAIT	MAIL		
(B	Business Entity Name)			
(0	Occument Number)			
Certified Copies	Certificates of	Status		
Special Instructions to Filling Officer:				

Office Use Only



700413697557

S. CHATHAM AUG 17 2023

2023 ACIS 15 AHTT: 24



CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO.	:	12000000)195	
REFERENCE	:	934392	8323810	
AUTHORIZATION	:		- !	
COST LIMIT	:	\$ 857.002	Elman	
ORDER DATE : August 11, 2023				
ORDER TIME : 9:20 AM				
ORDER NO. : 934392-010				
CUSTOMER NO: 8323810				
CHANGE OF AGENT				
MANG DOLDGEOUS AS	22.		a	
NAME: BROADSTONE AT	BR.	ICKELL, LI	iC	
PLEASE RETURN THE FOLLOWING AS	PRO	OOF OF FIL	ING:	
CERTIFIED COPY				
XX PLAIN STAMPED COPY				
CONTACT PERSON: Eyliena Baker		EXT#		

EXAMINER:

COVER LETTER

SUBJECT: Broadstone At Brickell, LLC
Name of Limited Liability Company DOCUMENT NUMBER: M14000007468 The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing. Please return all correspondence concerning this matter to the following: RESIGNATIONS DEPARTMENT Name of Person CORPORATION SERVICE COMPANY Name of Firm/Company 251 LITTLE FALLS DRIVE Address WILMINGTON, DE 19808
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing. Please return all correspondence concerning this matter to the following: RESIGNATIONS DEPARTMENT Name of Person CORPORATION SERVICE COMPANY Name of Firm/Company 251 LITTLE FALLS DRIVE Address WILMINGTON, DE 19808
For filing. Please return all correspondence concerning this matter to the following: RESIGNATIONS DEPARTMENT Name of Person CORPORATION SERVICE COMPANY Name of Firm/Company 251 LITTLE FALLS DRIVE Address WILMINGTON, DE 19808
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251 LITTLE FALLS DRIVE Address WILMINGTON, DE 19808
Address WILMINGTON, DE 19808
WILMINGTON, DE 19808
City/State and Zip Code
ANNUALREPORTS@CSCGLOBAL.COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
RESIGNATION DEPT 800 927-9801 at ()
Name of Person Area Code Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 60	5.0115. Florida Statut	es, the undersigned.		
CORPORATION SERVICE COMPANY Name of Registered Agent		. hereby resigns as		
		. Horeo, resigns as		
Registered Agent for Broadstone At Brid	ekell, LLC			
Name	of Limited Liability Com	pany		
M14000007468				
Document Number, if known	 			
The agency is terminated and the office				
If signing on behalf of an entity:		~ ~		
BY EYLIENA	BAKER			
Typed or Printed Name VICE PRESIDENT		me 2023 / 15 / 15 / 15 / 15 / 15 / 15 / 15 / 1		
\$ 85	Capacity ING FEES: 5.00 Active limites 5.00 Administrative withdrawn li	d liability company rely dissolved/ wited liability company		

Make checks payable to Florida Department of State and mail to: **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314