M15000006551

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





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51.50.51-61619-601 4409.00

2021 FEB -2 PH 12: 26

C. K 3/11/21



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: January 29, 2021

Order#: 633929-031

Re: SPYGLASS - THE CANOPY LLC

Enclosed please find:

XX _ Change of Registered Agent and Office.

 \overline{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.

1.	Na	me of the limited liability company: SPYGLASS - TH	IE CAI	۷O	PY LLC	
2	(a)	48 Everett Road	ı	(b)	48 Everet	tt Road
٠.	(11)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	<u> </u>	(.,,		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Demarest, NJ 07627	-	- ! -	Demarest	, NJ 07627
		08/19/2015		N	И15 0 00000	3551
3,	(a)	Date of filing/registration in Florida C T CORPORATION SYSTEM	4.	_		Document number
.).	(a)	Registered Agent and Registered Office shown on the records of the 1200 SOUTH PINE ISLAND ROAD	he Flori	da I	Dept. of State	. ::
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
		PLANTATION , FL.	33324			2021 FEB
	(b)	Enter name of NEW Registered Agent and/or NEW Registered (Corporation Service Company	Office a	office address:		E-2 PH 12: 26
		NEW Registered Office Address:			-	2: 2:
		1201 Hays Street			<u> </u>	. j jan
		Tallahassee, FL_	32301			
cha age wa	inge ent v s/we	mited liability company is not organized under the law or changes are made, the Florida street address of the r will be identical. Or, in the case of a Florida limited lial are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	registe bility c Ethe lii	red on mit	l office and ipany, it is ed liability	I the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
		/s/ Jill Cilmi	Jill	Ci	lmi, Autho	rized Person
S	ignat	ure of a member or authorized representative of a member				Printed or typed name of signee
pro the to i	wisi obli nere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I ha I in writing of this change.	re to ac perforn for in ereby c	t i tar Cl con	n this capa ace of my a apter 605, firm that t	wity. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been
		Drace E-Kubly				
Sig Gr	natu ace	re of Registered Agent E. Kirby, Asst. Vice President of Corporation Service	Compa	any	,	

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