MICOCOCOS123

(Requestor's Name)								
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PICK-UP WAIT MAIL								
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SECRETARY OF SIT

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CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

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ACCOUNT NO. : 12000000195									
REFERENCE : 024016 8334108									
AUTHORIZATION: Somethile sea									
COST LIMIT : \$ 25.00									
ORDER DATE : October 12, 2022									
ORDER TIME : 1:39 PM									
ORDER NO. : 024016-072									
CUSTOMER NO: 8334108									
									
CHANGE OF AGENT									
NAME: POMPEII REALTY, LLC									
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:									
CERTIFIED COPY XX PLAIN STAMPED COPY									
CONTACT PERSON: Eyliena Baker									
EXAMINER'S INITIALS:									

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. N	Name of the limited liability company: POMPEII REA	ALTY, LLC	0						
)		(b)	C/O M MANAGE	MENT IN	1C.			
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(~)	Mailing a	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	215 COLES STREET			215 COLES STREET					
	JERSEY CITY, NJ 07310			JERSEY CITY, NJ 07310					
	11/01/2016		1	M16000008723					
3.	Date of filing/registration in Florida	4.	_	Docum	ent numb	per			
5. (a)								
J. (a	Registered Agent and Registered Office shown on the records of	of the Floric	da 1	Dept. of State:					
	Chung, Jay					_			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					JAI 38) } }		
	318 N.W. 23 STREET					CRE CRE) 100 OCT 13	77	
	Miami F	33127	33127 SSE						
						T A	7	i T	
(b)							ب	D	
	Enter name of NEW Registered Agent and/or NEW Registere	ed Office a	ddı	<u>'ess</u> :			02		
	Corporation Service Company							3	
	NEW Registered Office Address:								
	1201 Hays Street								
	Tallahassee	32301 L							
chang agent was/v	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited later authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	ne register liability co of the lin	red om nit	office and the bu pany, it is hereby ed liability compa	siness off confirme	fice of the r ed that the o	egisi chan	ered ge(s)	
	loishe Mana	Mo	oist	ne Mana, Authoriz	ed Perso	n			
_	ature of a member or authorized representative of a member		• •	me of signee					
provis the ob- to me.	eby accept the appointment as registered agent and as sions of all statutes relative to the proper and complete pligations of my position as registered agent as provide rely reflect a change in the registered office address. I sed in writing of this change.	gree to ac e perform led for in l l hereby c	et ir ian Ch con	n this capacity. I ace of my duties, a apter 605, F.S. (firm that the limit	further as ind I am f Or, if this d ted liabili	gree to com familiar wit document i ty company	ply v h an s bei has	with the d accept ng filed been	
77	Mrs 7-Kuble								
Signal	ure of Registered Agent \								

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

Grace E. Kirby, Asst. Vice President