## M16000010025

•	(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 t	o Filing Officer:
-	

Office Use Only



100395946671

2022 OCT 13 PH 3: 30

022 OCT 13 AM II: I

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195						
REFERENCE : 024016 8334108						
AUTHORIZATION: Spelle Red						
COST LIMIT : \$ 25.00						
ORDER DATE : October 12, 2022						
ORDER TIME : 1:28 PM						
ORDER NO. : 024016-020						
CUSTOMER NO: 8334108						
CHANGE OF AGENT						
NAME: 30 EAST FLAGLER REALTY, LLC						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY 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.	Na	me of the limited liability company:	ER REA	ALTY, LLC						
2. (	(a)	C/O MANA W/VNIW/OOD		(b) C/O MANA WYNWOOD						
(	,			Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)						
		318 NW 23RD STREET		318 NW 2	23RD STREET					
		MIAMI, FL 33127	_	MIAMI, FI	L 33127					
		12/13/2016		M1600001	10025					
3.		Date of filing/registration in Florida	4.		Document number					
5.	(a)									
	()	Registered Agent and Registered Office shown on the records of the	he Florida	Dept. of State	<del>-</del> e:					
		Chung, Jay			,					
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS	<u> </u>	_	. 13	~			
		318 N.W. 23 STREET				15. 15.	022			
		Miami . FL	33127			EURO DARY OF ST	2022 OCT 13 AM 11: 16			
					= = = = = = = = = = = = = = = = = = =		ယ်	Server .		
(	(b)	Enter name of NEW Registered Agent and/or NEW Registered		.1		ńs:	F			
		Enter name of NEW Registered Agent and/or NEW Registered	Office au	<u>aress</u> :		n nai	=			
		Corporation Service Company	_		r _	<u> </u>	9			
		NEW Registered Office Address:			_					
		1201 Hays Street		<u>_</u>	_					
		Tallahassee .FL	32301							
16.1	,.			<i>a c</i>	-					
char ager was	nge nt w /we	mited liability company is not organized under the law or changes are made, the Florida street address of the vill 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	registere bility co f the lim	ed office and mpany, it is ited liability	d the business office s hereby confirmed t y company or as othe	of tl hat t	he regis he chai	stered ige(s)		
		loishe Mana	Moi	she Mana, <i>i</i>	Authorized Person					
		are of a member or authorized representative of a member			Printed or typed name of	_				
pro the to n	visio obli igra	by accept the appointment as registered agent and agreens of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I have been this change.	re to act performa for in C ereby ca	in this capa ince of my a Thapter 605 onfirm that t	acity. I further agree duties, and I am fam. , F.S. Or, if this doc the limited liability c	e to c iliar rume romp	comply with an nt is he any ha	with the ad accept ang filed s been		
7	~ `	re of Registered Agent								

Grace E. Kirby, Asst. Vice President
Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00