M17000002865

(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:					

Office Use Only



000385879110

LIC RA ERO Change

2022 APR 15 AM 9: 24

2022 APR 15 PH 3: 26

A. RAMSEY APR 1 8 2022 CORPORATION SERVICE COMPANY 1201 Hays Street

CONTACT PERSON: Eyliena Baker

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195					
REFERENCE : 621166 7226307					
AUTHORIZATION : Conglo &					
COST LIMIT : \$25.00					
ORDER DATE : April 14, 2022					
ORDER TIME : 1:51 PM					
ORDER NO. : 621166-015					
CUSTOMER NO: 7226307					
CHANGE OF AGENT					
NAME: CITY CENTRE ASSOCIATES, LLC					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY					

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:	ASSOCIATES LLC		
2. (a)	11780 US Highway One	11780 US Highway One		
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	SUITE 305	SUITE 305		
	North Palm Beach, FL 33408	North Palm Beach, FL 33408		
	04/04/2017	M17000002865		
3.	Date of filing/registration in Florida	4. Do	cument number	
5. (a)	Waxman, Brian K			
	Registered Agent and Registered Office shown on the records of 11780 US Highway One	he Florida Dept. of State:	202	
	Registered Office Address (MUST BE FLORIDA STREET) Suite 305	ADDRESS)	MER AR IS THE	
	North Palm Beach	33408	TED ES	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> Corporation Service Company	Office address:	至 9: 24	
	NEW Registered Office Address:			
	1201 Hays Street			
	Tallahassee FL	32301		
change agent w was/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 lia- are authorized by an affirmative vote of the members of celes of organization or the operating agreement of the	registered office and th bility company, it is he f the limited liability co	e business office of the registered reby confirmed that the change(s) ompany or as otherwise provided in	
	Brian K. Waxman	Brian K. Waxman,	Manager	
Signat	ure of a member or authorized representative of a member	Pri	nted or typed name of signee	
provision the obli to mere	by accept the appointment as registered agent and agrons 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 the change in the registered office address. I have the change in the registered office address. I have the change in the registered of the change in the change.	ee to act in this capacir performance of my duti for in Chapter 605, F. ereby confirm that the	v. I further agree to comply with the es, and I am familiar with and accept S. Or, if this document is being filed limited liability company has been	
	Maco CKuby e of Registered Agent	Grace E. Kirby	, Asst. Vice President	