Division of Corporations

## Florida Department of S

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 : (561)694-8107 Phone : (561)694-1639 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address:

## LLC REGISTERED AGENT CHANGE SUNSTREET MANAGER, LĻC

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Certificate of Status	0
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Page Count	02
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## 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.

I. No	ame of the limited liability company:	NAGER, LLC	
2. (a)	700 N.W. 107th Avenue	(b)	. 107th Avenue
2. (B) _	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 400	Suite 400	
	Miami, FL 33172	Miami, F	. 33172
	04/13/2017	M1700000	] 1199 
3. 5. (a)	Date of filing/registration in Florida C T CORPORATION SYSTEM	4.	Document number
5. (a)	Registered Agent and Registered Office shown on the records of the 1200 SOUTH PINE ISLAND ROAD	ne Florida Dept. of Sta	
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)	SECRETARY
	PLANTATION , FL	33324	UL 29
(b)	Corporate Creations Network Inc.		Y OF
. ,	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	ن ق ال
	801 US Highway I		31.5
	NEW Registered Office Address:		
	North Palm Beach . FL	33408	<u></u>
chang agent	limited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	bility company, it if the limited liability to the limited liability continuity continui	is hereby confirmed that the change(s) ity company or as otherwise provided in mpany.
	ature of a member or addrefized representative of a member	Danielle Gossii	Printed or typed name of signee
I here provi- the ol- to me	eby accept the appointment as registered agent and agr sions of all statutes relative to the proper and complete bligations of my position as registered agent as provided rely reflect a change in the registered office address, I he ed in writing of his change.		
Signa	Danielle Gossman, Special Secret	lary	20224