## M180000002416

(Requestor's Name)				
(Address)				
(Address)				
(Madicas)				
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
<del></del>	<del>_</del>	_		
(Bu	siness Entity Nan	ne)		
(Do	cument Number)			
Certified Copies	Certificates	of Status		
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Special Instructions to	Filing Officer:			
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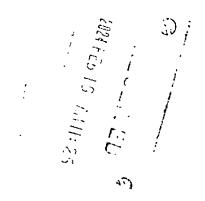
Office Use Only



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LLC RA ERO Charse





A. RAMSEY FEB &0. 2024 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee FL 32301

CONTACT PERSON: Shauna Godbolt

Tallhassee, FL 32301 Phone: 850-558-1500

**;** -

ACCOUNT NO. : I2000000195						
REFERENCE : 280998 8435053						
AUTHORIZATION : (/						
COST LIMIT : \$ 25.0						
ORDER DATE : January 23, 2024						
ORDER DATE: Sandary 25, 2024						
ORDER TIME : 9:28 AM						
ORDER NO. : 280998-398						
CUSTOMER NO: 8435053						
CHANGE OF AGENT						
NAME: NRT NEW ENGLAND 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: NRT NEW ENC	SLAND LI	LC	C
2.	(a)		(ł	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)
		826 Boylston Street Suite 201			826 Boylston Street Suite 201
		Chestnut Hill, MA 02467			Chestnut Hill, MA 02467
		03/09/2018		1	M18000002416
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)				Dept. of State:
	(4)	Registered Agent and Registered Office shown on the records of	the Florida	a [	Dept. of State:
		CORPORATE CREATIONS NETWORK INC.			8 19
		Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	<u>S)</u>	3 19 F
		801 US HIGHWAY 1			
		NORTH PALM BEACH	33408		7 2
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	- <u></u>		
	(b)				
		Enter name of NEW Registered Agent and/or NEW Registered	l Office ad	ldr	dress:
		Corporation Service Company			
		NEW Registered Office Address:			
		1201 Hays Street			
		Tallahassee	32301		
cha age wa:	inge ent w s/we	mited liability company is not organized under the last or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited line authorized by an affirmative vote of the members of organization or the operating agreement of the	registere ability co of the lim limited l	ed om nit lia	d office and the business office of the registered mpany, it is hereby confirmed that the change(s) ted liability company or as otherwise provided in ability company.
		Xu & Comi	JILL	_ (	CILMI, AUTHORIZED PERSON
	_	ure of a thember or authorized representative of a member			Printed or typed name of signee
I h pro the to n not	ereb visio obli nere ified	w accept the appointment as registered agent and age ons of all statutes relative to the proper and complete gations of my position as registered agent as provide by reflect a change in the registered office address, I i 'in writing of this change.	ree to act performa d for in C hereby co	ir an Ch On	in this capacity. I further agree to comply with the nee of my duties, and I am familiar with and accept hapter 605, F.S. Or, if this document is being filed after that the limited liability company has been
Sig	natur	E of Registered Agent	GRACE	E	E. KIRBY, ASST. VICE PRESIDENT