

M18000010742

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

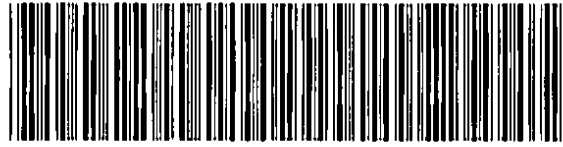
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF REGISTRATION
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SULKER

NOV 10 2020



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: 120000000088

Date: 11/06/2020

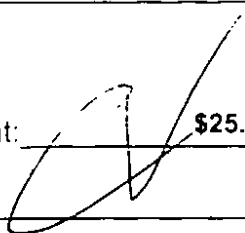
Name: Chris Vick

Reference #: 1285891

Entity Name: FAIR HAVENS PROPCO, LLC

- Articles of Incorporation/Authorization to Transact Business
- Amendment
- Change of Agent
- Reinstatement
- Conversion
- Merger
- Dissolution/Withdrawal
- Fictitious Name
- Other _____

Authorized Amount: \$25.00

Signature: 

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. Name of the limited liability company: Fair Havens Propco, LLC

2. (a) 2901 Stirling Road, Ste 200
 Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
Ft. Lauderdale, FL 33312

(b) _____
 Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

3. November 30, 2018 Date of filing/registration in Florida

4. M18000010742 Document number

5. (a) COGENCY GLOBAL INC.
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

115 N Calhoun St., Suite 4
 Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*
Tallahassee, FL 32301

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 TALLAHASSEE, FLORIDA

(b) COGENCY GLOBAL INC.
 Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
115 North Calhoun Street, Suite 4
NEW Registered Office Address:
Tallahassee, FL 32301

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

 Signature of a member or authorized representative of a member

Bent Philipson
 Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

/s. Eric Hood, Assistant Secretary

 Signature of Registered Agent