H1900004681

(Requestor's Name)				
(Address)				
(Address)				
(Čity/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
J. HORNE MAY 25 2022				

Office Use Only



500388337815

2022 MAY 24 AM 10: 04 SECRETARY OF STATE TALLAHASSEE FEET AT THE

2022 MAY 24 PM 3: 35

RECEIVED

CORPORATION SERVICE COMPANY 1201 Hays Street

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	;	120000001	95	
	REFERENCE	:	700762	8374597	
	AUTHORIZATION	: -	Louisele	man	
	COST LIMIT	:	\$, 25, 00		
ORDER DATE :	May 23, 2022				
ORDER TIME :	2:07 PM				
ORDER NO. :	700762-022				
CUSTOMER NO:	8374597				
				-	
CHANGE OF AGENT					
NAME .	CCC CD IIC				
NAME:	CCC GP, LLC				
PLEASE RETURN	THE FOLLOWING AS	PRC	OF OF FILT	NG :	
			01 01 1121		
CERTIFIED COPY XX 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.

2. (a)	1759 49TH ST.	(b) 17	(b) 1759 49TH ST.		
- . ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	BROOKLYN, NY 11204 BROOKLY		ROOKLYN, NY 11204		
	05/00/2010		000004604		
,	05/09/2019		9000004681		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	Bohan, Laura	·			
	Registered Agent and Registered Office shown on the records of the 5011 SOUTH STATE ROAD 7	ne Florida Depi	t, of State:		
	Registered Office Address (MUST BE FLORIDA STREET A				
	SUITE:106				
	DAVIE , FL	33314	2022 MAY 24 SECRETARY ALLAHASSEE		
			ARE ARE		
(b)	Enter name of NEW Registered Agent and/or NEW Registered C				
	Enter name of NEW Registered Agent and/or NEW Registered C	Office address	· 1—		
	Corporation Service Company		AH IO: QL		
	NEW Registered Office Address:		. 0		
	1201 Hays Street		<u> </u>		
	Tallahassee .FL	32301			
change agent w was/we the artic	mited liability company is not organized under the laws or changes are made, the Florida street address of the result be identical. Or, in the case of a Florida limited liability authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liability (illustrated).	egistered of pility compa the limited mited liabil	fice and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in		
/s/ Jill Cilmi Signature of a member or authorized representative of a member			Printed or typed name of signee		
I hereb provision the oblition mere	by accept the appointment as registered agent and agre- ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I he I in writing of this change.	e to act in the erformance for in Chap creby confire	nis capacity. I further agree to comply with the		

Grace E. Kirby, Asst. Vice President