12/23/24, 10.23 AM

Division of Corporations



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Division of Corporations

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Account Number : FCA000000023 : (614)280-3338 Fax Number : (614)573-3996

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LLC REGISTERED AGENT CHANGE PLANTA COCOWALK LLC

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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

1. Ni	ame of the limited liability company: PLANTA COCOV	VALK LL	С		
2. (a)	3015 Grand AvenueStifte 201Coconut Grove, FL 33133	(h)		ERCE STREET	
(ar	Principal office address of limited hability company: (Note: MUST BE STREET ADDRESS)	(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
		MIAMI BEA	ACH FL 33139		
	01/17/2020		120000000075		
3.	Date of filing/registration in Florida	J.	Į	Document number	
5. (a)					
	Registered Agent and Registered Office shown on the records of the CT CORP				
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)			
	ONE INDEPENDENT DRIVE, SUITE 1300JACKSONV				
	, FI.	32202			
(b)	C T Corporation System		202		
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	(ess)	APPRO AN FILI 1024 DEC 23 1341 MASS		
	NEW Registered Office Address:	.,	PR ED PH		
	1200 South Pine Island Road		చ _్ <mark>చ</mark>		
	Plantation, FL_	33324		8	
the cha agent v was/we the art	imited liability company is not organized under the lawinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liagree authorized by an affirmative vote of the members of ieles of organization or the operating agreement of the	the regist bility cor I the limi lunited li	ered office a apany, it is l and hability ability comp	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.	
- Ciano	ture of a member or authorized representative of a member.	/ Jessic	a Crowley	Printed or typed name of signor	
There provisi the obj to mer	hy accept the appointment as registered agent and agri- ions of all statutes relative to the proper and complete l ligations of my position as registered agent as provided ely reflect a change in the registered office address. I had in writing of this change.	oo ta aet .	n this cana	sity. I further surge to county with the	
By:	C T Corporation System	5	Leslie Ma	rtin, Assistant Secretary	
Signatu	tre of Registered Agent				