((Requestor's Name)	
	(4)	
((Address)	
	(Address)	
·	,	
	(City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
	(Duningan Entity Name)	
,	(Business Entity Name)	
	(Document Number)	
Certified Copies	_ Certificates of	Status
		
Special Instructions to	Filing Officer:	

Office Use Only



300395947153

A. BUTLER OCT 14 2022 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT	NO.	=	120000000195

REFERENCE : 024016 _ 8334108

AUTHORIZATION: STORE RELEGIO

COST LIMIT : \$ 25.00

ORDER DATE: October 12, 2022

ORDER TIME : 1:27 PM

ORDER NO. : 024016-014

CUSTOMER NO: 8334108

CHANGE OF AGENT

NAME: 201 SW FIRST STREET REALTY,

LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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.

 N (a) 	lame of the limited liability company:	(h	9)		
2. (a)			Mailing address of limited liability of	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	215 COLES STREET		215 COLES STREET		
	JERSEY CITY, NJ 07306		JERSEY CITY, NJ 07306		
	01/30/2020		M20000001279		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)				
J. (a	Registered Agent and Registered Office shown on the record	ds of the Florida	Dept. of State:		
Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 318 NW 23RD STREET					
	MIAMI	. FL_33127	2022		
(b)	·		2022 OCT	~ []	
(0)	Enter name of NEW Registered Agent and/or NEW Regist		dress: The control of	res de	
	Corporation Service Company		OF STAT		
	NEW Registered Office Address:		그를 할	1	
	1201 Hays Street		<u></u>	•	
	Tallahassee	. FL			
changagent was/w	limited liability company is not organized under the e or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limite are authorized by an affirmative vote of the membericles of organization or the operating agreement of	f the registere ed liability cor ers of the limi	ed office and the business office of the re- mpany, it is hereby confirmed that the ch ited liability company or as otherwise pro-	gistered nange(s)	
/S/ Moishe Mana		Mois	Moishe Mana, Authorized Person		
Sign	ature of a member or authorized representative of a member		Printed or typed name of signee		
provis the ob to mei	by accept the appointment as registered agent and ions of all statutes relative to the proper and complifications of my position as registered agent as provely reflect a change in the registered office addressed in writing of this change.	lete performa vided for in C	mce of my duties, and I am familiar with Thapter 605. F.S. Or, if this document is	and accept being filed	

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent

Grace E. Kirby, Asst. Vice President