M2000003725

(R	'equestor's Name)	
(A	daress)	
(A	ddress)	
(C	ity/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(8	usiness Entity Name)	·
(D	ocument Number)	
Copies	Certificates o	f Status
: Instructions to Fil	ling Officer:	
-		

Office Use Only



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APR 27 2023

CORPORATION SERVICE COMPANY

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

ACCOUNT NO. : 12000000195							
REFERENCE : 687337 7784733							
AUTHORIZATION :							
COST LIMIT : \$ 25.00							
ORDER DATE : April 19, 2023							
ORDER TIME : 9:50 AM							
ORDER NO. : 687337-043							
CUSTOMER NO: 7784733							
CHANGE OF AGENT							
NAME. DECMENTADE TAY OUNTED ITC							
NAME: PROMENADE JAX OWNER, 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.

l. Na	me of the limited liability company: PROMENADE	JAX OV	VNE	ER, LLC		
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)	M	lailing address of limite	ed liability company:
	1451 Home Street c/o Chance Partners, LLC			P.O. BOX	10292	
	JACKSONVILLE, FL 32207	_	-	JACKSON	VILLE, FL 32207	
	04/15/2020		Ν	120000003	725	
3.	Date of filing/registration in Florida	4.			Document number	
5. (a)						
	Registered Agent and Registered Office shown on the records of NRAI SERVICES, INC.	the Florid	da I	Pept. of State:		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					2023
	1200 SOUTH PINE ISLAND ROAD					APR .
	PLANTATION	33324 L				R 26
(b)	Enter name of NEW Registered Agent and/or NEW Registered	d Office a	dde		-	量づ
	and mane of the state of the st	u Chine a	uu 1	<u>css</u> .		دع . • •
	Corporation Service Company					
	NEW Registered Office Address:					
	1201 Hays Street					
	-					
	Tallahassee, FI	32301 				
change agent w was/we the artic	mited liability company is not organized under the la or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited li are authorized by an affirmative vote of the members cles of organization or the operating agreement of the	register ability c of the lir	red om nite	office and pany, it is led	the business office hereby confirmed t company or as other	of the registered hat the change(s)
				Cilmi, Authorized Person		
_	ure of a member or authorized representative of a member				Printed or typed name of	_
I herel provision the oblition to mere notified	by 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'm writing of this change.	ree to ac perform d for in hereby c	t in ian Chi onj	this capac ce of my di apter 605, firm that th	eity. I further agree ties, and I am fam F.S. Or, if this doc e limited liability c	e to comply with the iliar with and accept cument is being filed company has been
Signatur	Linace C. Kubi e of Registered Agent	GRACI	ΕE	. KIRBY. A	ASST. VICE PRES	SIDENT