M20000	005185
(Requestor's Name) (Address) (Address)	900377209939
(City/State/Zip/Phone #)	2021 DEC 27 1:1 0
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	9:15 2021 DEC 27: PH I2: 0 ALLANASSEE ALLANASSEE ALLANA
Office Use Only	PHI2:09

COGENCYGLOBAL	115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 <b>866.625.0838</b> COGENCYGLOBAL.COM	
Date: December 23, 2021	Account#: 12000000088	
Name: David Shulman		
Reference #:1524944		
Entity Name: FYVE REALTY FLORI	DA, LLC	
Articles of Incorporation/Authorization to Transact Bu	usiness	
Amendment		
Change of Agent		
Reinstatement	ISSUES? CALL David:	
	850-270-0082	
Merger		
Dissolution/Withdrawal		
Fictitious Name		
Other		

Authorized Amount: \$25.00

**⊅**∠5.00

David Shalman

Signature:

.

.

٠

FCORPORATE HQ CUGENCY GLOBALINC IC E.4C ST.10 FFL 13 147 (60% 800.221.0102 -1.212.947.7200 HEUROPEAN HQ COGENCY GLOBAL (UR) LIMITED BEG VERED DELICIAND VIA F3 HEC STREAM TUTC 6 BEVIS MARKS, THE LONDON EC3A 78A +44 (0)20.3786.1090

ASIA PACIFIC HQ
 COGENCY GLOBAL (HK) LIMITED
 AHONG KONGLIM TED ZOWANM
 INFENTION PLAZA 12 F FL
 199 DES VOEUX PD CENTRAL
 HONG KONG
 +852,3975.1803



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 866.625.0838 **COGENCYGLOBAL.COM** 

Date: December 23, 2	2021	Account#: I2000000088				
Name: David Shulm	nan					
Reference #:152	4944					
Entity Name:	FYVE REALTY	FLORIDA, LLC				
Articles of Incorporation	Authorization to Trar	nsact Business				
Amendment						
Change of Agent		ISSUES? CALL				
Reinstatement		ISSUES? CALL David: 850-270-0082				
Conversion		850-270-0082				
Merger						
Dissolution/Withdrawal						
Fictitious Name						
Other						

Authorized Amount:

\$25.00

Signature:

David Shulman

CORPORATE HQ COGENCY GLOBAL INC. ICE 40 ST 10 FL 145-145 10016 800.221.0:02 +1.212.947.7200

FEUROPEAN HQ COGENCY GLOBAL (UK) EMITED SEG VERED NENCLAND & AA ES REUS IM BRITUDI 6 BEVIS MARKS, 1-41 LONDON EC3A 784 +44 (0)20.3786.1090

ASIA PACIFIC HQ COGENCY GLOBAL (HK) LIMTED A HONG FONGE IN TED COMPANY INFINITUS PLAZA (2114) 199 DES VOEUX PD CENTRAL HOLG KONG +852.3975.1803

## 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.

(a) _		(b)	
	Principal office address of limited liability compan ( <u>Note: MUST BE STREET ADDRESS</u> )	y:	Mailing address of limited liability company ( <u>Note: MAY BE POST OFFICE BOX</u> )
	No Change		lo Change
-	June 10, 2020		M2000005185
	Date of filing/registration in Florida	4.	Document number
	CT Corporation System		
I	Registered Agent and Registered Office shown on the reco	rds of the Florida De	pt. of State:
	1200 South Pine Island Road		
	Registered Office Address <u>(MUST BE FLORIDA STR</u>	<u>REET ADDRESS)</u>	
	Plantation	FL_ <b>33324</b>	
h)	COGENCY GLOBAL INC.		
1	Enter name of NEW Registered Agent and/or NEW Regi	stered Office addres	
	115 North Calhoun St., Suite 4		. Un
	NEW Registered Office Address:		
	Tallahassee	. FL 32301	
e char gent w as/wei	mited liability company is not organized under t age or changes are made, the Florida street addr ill be identical. Or, in the case of a Florida limit re authorized by an affirmative vote of the mem	he laws of the Sta ess of the register ted liability comp bers of the limite	red office and the business office pany, it is hereby confirmed that ( d liability company or as otherwi
	eles of organization or the operating agreement of Bohm	of the limited liab Jeff Bo	

Signature of a member or authorized representative of a member

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/ Michael Carlisle

Signature of Registered Agent Michael Carlisle, Assistant Secretary Division of Corporations• P.O. Box 6327• Tallahassee. FL 32314 FILING FEE: \$25.00