

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000106374 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (954)208-0845 Fax Number : (614)573-3996

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC REGISTERED AGENT CHANGE MIAMI COURT LII, LLC

Certificate of Status	0
Certified Copy	1 '
Page Count	02
Estimated Charge	855.00

Electronic Filing Menu Corporate Filing Menu

Help

MAR 2 2 2023 T. LEMIEUX

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 Statines, 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.

I. Na	ame of the limited liability company: MIAMI COURT	LII, LLC					
2. (a)	777 S. Figueroa St.		777 S. Fig	ueroa St.			
(Principal office address of limited hability company (Note: MUST BE STREET ADDRESS)			Mading address of limit (Note: MAY BE POS	•		:
	Suite 4700		Suite 4700				
	Los Angeles, CA 90017		Los Angelo	es, CA 90017			
	07/10/2020		M20000006	257			
3.	Date of filing/registration in Florida	4.		Document number			
5. (a)	CORPORATION SERVICE COMPANY						
J. (4)	Registered Agent and Registered Office shown on the records of 1201 HAYS STREET	the Florid	a Dept of State	e			
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRES:	<u>z)</u>	-			
	TALLAHASSEE	32301		_	*** F		
(b)	C I Corporation System			_	125	2023 44 2 21	
	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	ldress'			بر م	
	1200 South Pine Island Road						٠. ب
	NEW Registered Office Address:					AH IS: 2	Ċ.
				_	(·)	Ğ	
	Plantation, F1	33324			₹	27	
the cha agent v was/wo	imited liability company is not organized under the layinge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited light authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	ws of the f the regi ability co of the lin limited	State of Flo stered office ompany, it is nited liability	orida, it is hereby co e and the husiness of s hereby confirmed y company or as of ipany.	iffice of the c	ie regis hange(stered s)
Signa	ture of a member or authorized representative of a member			Printed or typed name	of signee		
I here provisi the obl to mero notified By:	by accept the appointment as registered agent and agreems of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. If in writing of this change. C.T. Corporation System Wickly Held MIC re of Registered Agent	perform d for in- herchy c	iance of my (Chapter 602 oufirm that	auties, and Lam far, 5, F.S. Or, if this do the limited hability	ce to com niliar wit, ocument i, company	ply with h and a s heing s has be	h the lecept filed en