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

ACCOUNT NO. : I20000000195 REFERENCE : 471241 7596800 AUTHORIZATION COST LIMIT : \$25.00		
ORDER DATE : May 16, 2024 ORDER TIME : 4:00 PM ORDER NO. : 471241-002	; ;	1 1:024
CUSTOMER NO: 7596800		8 AH 9:1
CHANGE OF AGENT		10
NAME: 1177 BAY HARBOR ISLANDS, LLC		
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY XXXXX PLAIN STAMPED COPY		
CONTACT PERSON: Amanda Miller 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.

1.	Na	me of the limited liability company: 1177 BAY HA	RBOR ISL	A.	NDS, LLC						
2.	(a)		(H	n ì							
	(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b) Mailing address of limited liability (Note: MAY BE POST OFFICE)						oany:		
					MARY STREET #302						
		COCONUT GROVE, FL 33133		-	COCONUT	COCONUT GROVE, FL 33133					
		05/21/2021		ľ	и210000062	274					
3.		Date of filing/registration in Florida	4.	_	D	ocument nun	nber ·				
5.	(a)										
	()	Registered Agent and Registered Office shown on the records of NRAI SERVICES, INC.	of the Florida	ı D	Dept. of State:						
		Registered Office Address (MUST BE FLORIDA STREET	ADDRESS								
		1200 SOUTH PINE ISLAND ROAD						2[
		PLANTATION	. 33324		· · · · · · · · · · · · · · · · · · ·		i	3024 JUN 18	قدالت		
			~ <u>-</u>	_	, 		£-	=			
(b) _	Enter name of NEW Registered Agent and/or NEW Registere					Ś	∞			
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office add	<u>dr</u>	ess:		. ,	Ā	111		
		Corporation Service Company					11.9	9: 04			
		NEW Registered Office Address:					•	Ę.,			
		1201 Hays Street									
		Tallahassee, F	J32301								
chai agei was the i	nge i it w /wer artic	nited liability company is not organized under the last changes are made, the Florida street address of the ill be identical. Or, in the case of a Florida limited live authorized by an affirmative vote of the members lessof organization or the operating agreement of the	e registered ability cort of the limi	d o mp ite	office and the pany, it is he d liability co	he business o ereby confirm ompany or a	office of the	registe	ered e(s)		
		reof g member or authorized representative of a member	JILL	С	ILMI, AUTH	IORIZED PE	RSON				
Signature of a member or authorized representative of a member					Pr	Printed or typed name of signee					
the o	ısıo əbliş erel	vaccept the appointment as registered agent and ag ns of all statutes relative to the proper and complete gations of my position as registered agent as provide y reflect a change in the registered office address, I in writing of this change.	ree to act i performand for in Ci hereby con	in nc ha nfi	this capacit re of my duti upter 605, F, irm that the	ty. I further a ies, and I am .S. Or. if this limited liabil	agree to co familiar w s document lity compar	mply w ith ana is bein iy has t	ith the accept ig filed been		
Sign	ature	Inace C. Kinbly of Registered Agent	GRACE E	ł	CIRBY, AS:	ST. VICE P	RESIDENT	-			