

M21000013970

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

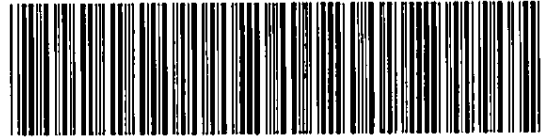
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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LLC
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ALLAH'S SEC. FLORIDA

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FEB 19 2024

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155 Office Plaza Dr Ste A Tallahassee FL 32301
PHONE: (800) 435-9371; FAX: (866) 860-8395**

DATE: 02/15/2024

NAME: CIG 3151 BABCOCK ST LLC

TYPE OF FILING: CHANGE OF RA

COST: 25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE



A handwritten signature in black ink, appearing to be 'Abbie Hodge', written over a horizontal line.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CIG 3151 S BABCOCK ST LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Name of Person

Firm/Company

Address

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Person at () Area Code & Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

- \$25 Filing Fee
- \$55 Filing Fee & Certified Copy

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. Name of the limited liability company: CIG 3151 S BABCOCK ST LLC

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
306 EAST 84TH ST.
NEW YORK, NY 10028

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
306 EAST 84TH ST.
NEW YORK, NY 10028

3. 12/15/2021 Date of filing/registration in Florida

4. M21000017049 Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
PLATINUM AGENT SERVICES LLC
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
155 OFFICE PLAZA DRIVE
TALLAHASSEE, FL 32301

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
DBO Services LLC
NEW Registered Office Address:
155 OFFICE PLAZA DR.
TALLAHASSEE, FL 32301

FILED
 2024 FEB 16 PM 1:28
 TALLAHASSEE, FL
 STATE OF FLORIDA
 DIVISION OF CORPORATIONS

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

/s/ Debra Einhorn Debra Einhorn
 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/ Devorah Glazer
 Signature of Registered Agent