H22000050911

(Requestor's Name)							
(Address)							
(Adcress)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
ried Copies Certificates of Status							
ectal Instructions to Filing Officer:							
J. HORNE							
JAN 1 3 2023							
JAN 1 0 2020							

Office Use Only



800400112588

2023 JAN 12 AM 11: 28









91.70

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195							
REFERENCE : 336581 8398617							
AUTHORIZATION: CHEROLOGIA							
COST LIMIT : \$ 25.00							
ORDER DATE : January 9, 2023							
ORDER TIME : 8:59 AM							
ORDER NO. : 336581-088							
CUSTOMER NO: 8398617							
CHANGE OF AGENT							
NAME: S2 JUPITER ISLES LLC							
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							
CERTIFIED COPY							
XX PLAIN STAMPED COPY							
CONTACT PERSON: Alexxis Weiland							
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:	LES LL	C			
7	(a)		(ЪΊ			
-	(**)	Principal office address of limited liability company; (Note: MUST BE STREET ADDRESS)	`	υ,		failing address of limited liability company: (Note: MAY BE POST OFFICE BON)	
		5950 BERKSHIRE LANE, STE 1300			3109 CAR	LISLE STREET, STE 100	
		DALLAS, TX 75225			DALLAS,	TX 75204	
		03/11/2022		N	/22000005	5097	
3.		Date of filing/registration in Florida	4.			Document number	
5.	(a)						
ν,	(11)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: C T CORPORATION SYSTEM				:	
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				20 14L	
		1200 SOUTH PINE ISLAND ROAD				23 J	
		PLANTATION FI	33324			F 11 2023 JAN 12 SECRETARY LLLAHASSER	
						7º ₹ 17	
	(b)	Enter name of NEW Registered Agent and/or NEW Registered	d Office o	4.1.		A III	
		Effect fiame of NEW Registered Agent and/or NEW Registered	J CHILCE A	<u> </u>	<u>. ess</u> .	28	
		Corporation Service Company				e.	
		NEW Registered Office Address:					
		1201 Hays Street					
		Tallahassee	32301				
		FI	JE301		-		
ch: age wa	ange ent v is/we	imited 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 ere authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	register ability co of the lin	ed om nit	office and pany, it is ed liability	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in	
		Xie E. Cionii	Jill	Jill Cilmi, Autorized Person			
- 5	Signat	aute of a member or authorized representative of a member				Printed or typed name of signee	
pro the to	ovisi e obli mere tifieç	by accept the appointment as registered agent and aging ons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I writing of this change.	ree to ac perform d for in (hereby c	t ir ian Ch con	n this capa ice of my d capter 605, firm that th	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed be limited liability company has been	
•	gnatui	re of Registered Agent					
G	irace	E. Kirby, Asst. Vice President Division of Corporations • P.O.	Box 632	7•	Tallahass	see, FL 32314	

FILING FEE: \$25.00