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A. RAMSEY FEB 30.2024



CORPORATION SERVICE COMPANY

XX PLAIN STAMPED COPY

CONTACT PERSON: Shauna Godbolt

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195 REFERENCE : 12809987 AUTHORIZATION COST LIMIT : \$ 25.0 ORDER DATE: January 23, 2024 ORDER TIME : 9:18 AM ORDER NO. : 280998-145 CUSTOMER NO: 8435053 CHANGE OF AGENT NAME: EQUESTRIAN SOTHEBY'S INTERNATIONAL REALTY LLC PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY

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. N	lame of the limited liability company: EQUESTRIAN	SOTHEB	Y'S INTERN	NATIONAL REALT	Y LLC	
2. (a)		<i>(</i>	o)			
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		<u>,</u>	Mailing address of limit (Note: MAY BE PO		y:
	12180 S SHORE BLVD STE 102		12180 S S	SHORE BLVD STE	102	
	WELLINGTON, FL 33414		WELLING	TON, FL 33414		
	11/09/2022		M2200001	7078		
3.	Date of filing/registration in Florida	4.		Document number	20	
5. (a)				2024 FEB	
J. (Registered Agent and Registered Office shown on the records of	f the Florida	Dept. of State	. ::	E E	
	CORPORATE CREATIONS NETWORK INC.				8 19 PH 12	17
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			-	1967年	
	801 US HIGHWAY 1				্ ন	مرسه
	NORTH PALM BEACH , F	33408		-	30	
	, F	L	<u> </u>	•		
(b)						
(**)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office ad	dress:	•		
	Corporation Service Company					
	NEW Registered Office Address:			•		
	1201 Hays Street					
	Tallahassee, FI	32301 				
chang agent was/w	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members dicles of organization or the operating agreement of the	registere ability co of the lim	ed office and impany, it is lited liability	I the business offic hereby confirmed company or as off	e of the registere that the change(s	ed s)
	Xie E. Clenie	JILL	CILMI, AU	THORIZED PERSO	ON	
	ature of a thember or authorized representative of a member			Printed or typed name	_	
I here provis the ob to mer notifie	by accept the appointment as registered agent and ag- tions of all statutes relative to the proper and complete digations of my position as registered agent as provide vely reflect a change in the registered office address, I d in writing of this ohange.	ree to act performa d for in C hereby co	in this capa ance of my d hapter 605, onfirm that to	city. I further agro luties, and I am fan F.S. Or, if this do he limited liability	ee to comply with niliar with and a ocument is being company has bed	'i the ccept filed en
Signat	ure of Registered Agent	GRACE	E. KIRBY,	ASST. VICE PRE	ESIDENT	