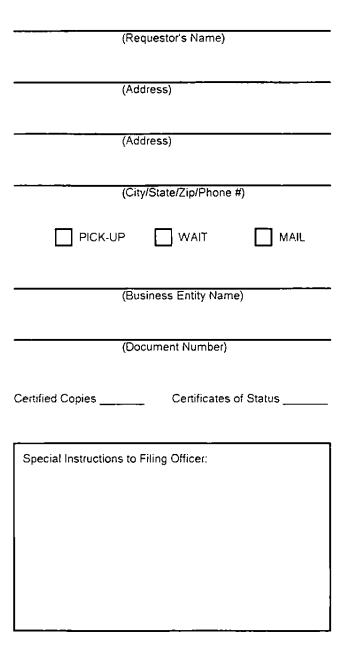
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Office Use Only





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COVER LETTER

TO: Registration Section Division of Corporations	· ,			
9380 Bay Drive, LLC SUBJECT:	•			
Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Of	fice Change and fee(s) are submitted for filing.			
Please return all correspondence concerning the	his matter to the following:			
Kylie Conrad & Kayla King				
Name of Person				
Corp1, Inc.				
Firm/Company				
7700 E Arapahoe Rd Ste 220				
Address				
Centennial, CO 80112				
City/State and Zip Code				
E-mail address: (to be used for future an	nual report notification)			
For further information concerning this matte	r. please call:			
Kylie Conrad	720 823-9273 at ()			
Name of Person	Area Code & Daytime Telephone Number			
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee. FI. 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 followin	g 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.

I. Na	ame of the limited liability company: 9380 Bay Drive.	LLC	
2. (a)	1801 N. MILITARY TRAIL	(b)	MILITARY TRAIL
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	SUITE 200	SUITE 20	00
	BOCA RATON, FL 33431	BOCA R	ATON, FL 33431
	03/30/2023	M2300000	4742
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	CORPORATION SERVICE COMPANY		
5. (a)	Registered Agent and Registered Office shown on the records of	the Florida Dept. of Sta	ite:
	1201 HAYS STREET		_
	Registered Office Address (MUST BE FLORIDA STREET	(ADDRESS)	
			_
	TALLAHASSEE	32301-2525	2024
(b)	Registered Agents Inc	~	2024 Fig. 2
	Enter name of NEW Registered Agent and/or NEW Registered Office address:		
	7901 4th St N		AII : 21
	NEW Registered Office Address:		— <u>13</u>
	Ste 300		<u> </u>
	St. Petersburg . F	33702	
change agent was/w was/w the art	limited liability company is not organized under the lage or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited light ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the YTTZHAK STERN	ws of the State of F e registered office a iability company, it of the limited liabili	nd the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in mpany.
Signa	iture of a member or authorized representative of a member		Printed or typed name of signee
provis the ob to mer	by accept the appointment as registered agent and agions 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, I d'in writing of this change.	ree to act in this cap e performance of my ed for in Chapter 60 hereby confirm that	oacity. I further agree to comply with the duties, and I am Jamiliar with and accept 15, F.S. Or, if this document is being filed the limited liability company has been
/s/ Da	ivid Roberts		
Signati	ure of Registered Agent		