# M2300007958

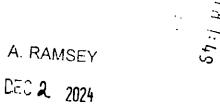
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#### **COVER LETTER**

TO: Registration Section Division of Corporations	
LANDAU PROPERT	IES ADMINISTRATION, LLC
	Name of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Re	egistered Office Change and fee(s) are submitted for filing.
Please return all correspondence of	concerning this matter to the following:
Name of	Person
Firm/Con	праву
Address	<del></del>
City/State and	d Zip Code
E-mail address: (to be used f	or future annual report notification)  g 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 th	e following amount:
□ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy
INHS18 (2/14)	

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuani 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	ame of the limited liability company:	PERTIE	S ADMINIST	RATION, LLC		
			(b)			
2. (a) _	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)		
	105 MADISON AVENUE, 2ND FLOOR		105 MAE	DISON AVENUE, 2	ND FLOOR	
	NEW YORK, NY 10016		NEW YO	RK, NY 10016		
	06/19/2023		M2300000		2824 NOV T	
3.	Date of filing/registration in Florida	4.		Document numb	xr Grand	
5. (a)				_	26	
J. (4)	Registered Agent and Registered Office shown on the records of	f the Flor	rida Dept. of Sta	te:		
	CT CORPORATION SYSTEM			<u>_</u>	ي پري	
	Registered Office Address (MUST BE FLORIDA STREET	ADDRI	(223		<u>유</u>	
	1200 SOUTH PINE ISLAND ROAD			<b></b>		
	PLANTATION	3332	4			
	PLANTATION , F	L				
	Enter name of NEW Registered Agent and/or NEW Registered  DBO Services LLC  NEW Registered Office Address:  155 OFFICE PLAZA DR.		ANAICH:	_		
	155 OFFICE PLAZA DK.			_		
	TALLAHASSEE, F	L_3230	1	_		
change agent was/w the art	limited liability company is not organized under the lie or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members icles of organization or the operating agreement of the source of a member or authorized representative of a member	aws of the limite limite	the State of Fitered office and company, it limited liability company to the company of the comp	is hereby confirmity company or as mpany.  Printed or typed no	ed that the change(s) otherwise provided in	
provis the ob- to mer notifie	by accept the appointment as registered agent and of ions of all statutes relative to the proper and complet ligations of my position as registered agent as providely reflect a change in the registered office address, and in writing of the change.  When the change is the change in the registered office address, and in writing of the change.	gree to e perfoi led for i i hereby	act in this cap rmance of my n Chapter 60 v confirm that	oacity. I further a duties, and I am 15, F.S. Or, if this the limited liabil	igree to compty with the familiar with and accept document is being filed lity company has been	

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