(((H24000352767 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 : (5611694-8107 Phone Fax Number

\*\*Enter the email address for this business entity to be used for future for annual report mailings. Enter only one email address please.\*\*

Email Address:

## LLC REGISTERED AGENT CHANGE CP PINEWOOD PAD OWNER, L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

M. SOLOMON

OCT 2 3 2024

Electronic Filing Menu Corporate Filing Menu

Help

## 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. N	ame of the limited liability company: CP Pinewood Pa	d Own	:г. L	.L.C.	n=	
2. (a)	245 Park Avenue 26th Floor		(b)	245 Park Avenue, 26th Floor		
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(-,	Mailing address of limited liabi (Note: MAY BE POST OF)		
	New York, NY 10167	_ <del>_</del>		New York, NY 10167		
	12/11/2023		N	M23000015497		
3.	Date of filing/registration in Florida	4.	_	Document number		
5. (a	C T CORPORATION SYSTEM					
. (4	Registered Agent and Registered Office shown on the records of 1200 SOUTH PINE ISLAND ROAD	the Flo	rida l	Dept. of State:		
	Registered Office Address (MUST BE FLORIDA STREET	ADDR	ESS)		207	
	PLANTATION, FI	3332	1		2024 OCT	mar ( em E (
(b)	Corporate Creations Network Inc.			· · ·	23 P	
	Enter name of NEW Registered Agent and/or NEW Registered	d Office	add	ress:	<u> </u>	
	801 US Highway 1				PH 4: 00	***************************************
	NEW Registered Office Address:					
	North Palm Beach	3340	3			
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 of the organization or the operating agreement of the	ws of the limite	he S erec con limit d lia	d office and the business office of the office of the open, it is hereby confirmed that the diability company or as otherwis.	e registe e chang	ered ge(s)
Sign	atralla / avaraz ature of a member or authorized representative of a member	-	. 3tl C	Printed or typed name of sign		
_						aide de s

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.

Signature of Registered Agent