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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053

Phone Fax Number : (561)694-8107 : (561)694-1639

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

<u> Email Address:</u>	

REGISTERED AGENT CHANGE LENNAR REALTY, INC.

S TALLEN

JUL 3 1 2020

Certificate of Status	0	
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of change	is submitted	d for a corporation orga	12, 607.1508, or 617.1508, Florida Statute nized under the laws of the State of Florid	<u> </u>
in order to	change its)	registered office or regist	ered agent, or both, in the State of Florida	L
1. The name of the o	comoration:	LENNAR REALTY, INC	2	
2. The principal offi	ce address:_	700 N.W. 107TH AVENU	JE, Suite 400, MIAMI, FL 33172	
3. The mailing addr	ess (if differ	rent):		
4. Date of incorpora	tion/qualific	cation: 06/18/2001	Document number: P01000060540	
5. The name and str	eet address		agent and registered office on file with the	
· c	T CORPOR	ATION SYSTEM		1021
12	200 SOUTH	PINE ISLAND ROAD		2020 JUL 30
P!	LANTATIO	N, FL 33324		30
6. The name and str (if changed):	eet address	of the new registered age	ent (if changed) and /or registered office	
Co	orporate Crea	ations Network Inc.		,
80	l U\$ Highw	ay 1		
No	orth Palm Be	P.O. Bo ach, Florida 33408	xx NOT acceptable	
			t address of the business office of its regi	
Such change was a authorized by the b	uthorized b	y resolution duly adopte corporation has been no	d by its board of directors or by an office otified in writing of the change.	I SO
	$-(\mathcal{N})$)	Danielle Gossman, Attorney-in-Fact	
I hereby accept the I further agree to c of my duties, and I document is being	appointme appointme omply with am familian filed merely en notified	nt as registered agent an the provisions of all sta with and accept the ob to reflect a change in th in writing of this change	Printed or typed same and title and agree to act in this capacity, tutes relative to the proper and complete ligation of my position as registered age the registered office address, I hereby con	performance nt. Or, if this firm that the
	(C. J.	<i>y</i>	07/30/2020	
-		Agent	Date	
If signing on behal	t ot an entit	y:		
Danielle Gossman, S	-			
Typed	or Printed Nam	Xt		

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