## P10000022240

	(Red	questor's Name)	
	(Àdc	lress)	· · · · · · · · · · · · · · · · · · ·
	(Add	Iress)	-
	(City	//State/Zip/Phon	e #)
PI	CK-UP	☐ WAIT	MAIL
	(Bus	siness Entity Na	me)
	(Doc	cument Number	)
Certified Copie	es	Certificate	s of Status
Special Instru	uctions to F	Filing Officer:	
, 			
		Office Use O	niy



100375392921

10/25/21--01030--007 \*\*35.00

FILED %
2021 OCT 25 AM 9: 04
SECTION S

C. BRUMBLEY NOV -5 2021

## **COVER LETTER**

CR2E045 (04/13)

TO: Amendment Section Division of Corporations					
SUBJECT: Cadiz Realty Company Name of Corporation					
DOCUMENT NUMBER: P10000022240					
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.					
Please return all correspondence concerning this matter	er to the following:				
Tim Henkel					
Name of Contact Person					
Henkel & Cohen, P.A.					
Firm/Company					
1730 Main Street, Suite 228					
Address Weston, FL 33326					
City/State and Zip Code					
tdh@miamibusinesslitigators.com					
E-mail address: (to be used for future annual repo	ort notification)				
13 man address. (to be asserted for ratare annual repo					
For further information concerning this matter, please	call:				
Tim Henkel	at (305 )389-6745				
Name of Contact Person	at (305 )389-6745 Area Code & Daytime Telephone Number				
Enclosed is a \$35.00 check made payable to the Depart	rtment of State.				
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH $\rightarrow$ FOR CORPORATIONS

statement of cha	e provisions of sections 607,0502, 617,0502, 607,1508, or 617, cange is submitted for a corporation organized under the laws ler to change its registered office or registered agent, or both, i	of the State of Florida	_
•	the corporation: Cadiz Realty Company	·	
	THE CHARLES OF THE DESCRIPTION OF THE TOP OF		_
3. The mailing a	address (if different):		<del>_</del>
	rporation/qualification: 03/11/2010 Document nur		
5. The name and	nd street address of the current registered agent and registered curtment of State: (If resigned, enter resigned)		
	Timothy D. Henkel		
	7480 SW 40th Street, Suite 450	2021 OCT SECLATION TALLS	7
	Miami, FL 33155	CT 25	-
6. The name and (if changed):	nd street address of the new registered agent (if changed) and /o	557	
	Timothy D. Henkel, Esq.	<b>0</b>	
	1730 Main Street, Suite 228		
	P O Box NOT acceptable		
	Weston, FL 33326		
The street address changed will	ress of its registered office and the street address of the busin If be identical.	less office of its registered ag	ent.
	vas authorized by resolution duly adopted by its board of dire the board, or the corporation has been notified in writing of t		
1	Margaret O'Cleirig		
	tire of an officer or director Printed of	or typed name and title	
-l further agrée of my duties, ai dociment is bei	If the appointment as registered agent and agree to act in this to comply with the provisions of all statutes relative to the pend I am familiar with and accept the obligation of my position in the registered office as been notified in writing of this change.	s capacity. proper and complete perform on as registered agent. Or, ij ddress, I hereby confirm that	ance this t the
Timathy	4 St. Henry 10/22/	121	
It signing on be	ehalf of an entity:	Date	
a signing on oc	enan or an enage.		
<del></del> -1	Typed or Printed Name		
	* * * FILING FEE: \$35.00 * * *		

Make CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
[CR2E045 (04/13)]