Placoogaco

-	(Requestor's Name)
-	
	(Address)
•	
	(Address)
	(City/State/Zip/Phone #)
•••	
•	PICK-UP WAIT MAIL
	(Business Entity Name)
-	(Document Number)
Certifi	ed Copies Certificates of Status
-	
Spec	cial Instructions to Filing Officer
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	NA
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	<u></u>
	Office Use Only
	Office Use Only



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To: Department Of State, Division Of Corporations From: Amanda Miller - Amanda.Miller@cscglobal.com

Ext:

Date: 05/10/24 Order #: 1503614-5

Re: EBERJEY SOUTH BEACH, INC.

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Change of Registered Agent and Office

Check in the amount of: \$35.00 - FL State Account Number: 120000000195

AUTH /

Please take the following action:

File on a routine basis Issue proof of filing

Return evidence to the following:

ATTN: Amanda Miller

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

. STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a corpora	2, 617.0502, 607.1508, or 617.1508, Florida Statutes, this tion organized under the laws of the State of Florida or registered agent, or both, in the State of Florida.
1. The name of t	he corporation: EBERJEY SO	UTH BEACH, INC.
2. The principal	office address: 1905 Purdy Av	enue Miami Beach, FL 33139
3. The mailing a	ddress (if different): 2222 Pone	ce De Leon Blvd Suite 2W101 Coral Gables, FL 33134
	poration/qualification: 11/02/2	
	street address of the current re tment of State: (If resigned, en	egistered agent and registered office on file with the
	Rovito, Mariela	
	2222 Ponce De Leon Blvd S	uite 2W101
	Coral Gables, FL 33134	Ta.
6. The name and (if changed):	street address of the new regis	stered agent (if changed) and /or registered office.
	Corporation Service Compar	ν <u>ν</u> ξε ξε ί
	1201 Hays Street	
		P.O. Box NOT acceptable
	Tallahassee	FL 32301
The street addre as changed will	ss of its registered office and be identical.	the street address of the business office of its registered agent
Such change wa authorized by th	s authorized by resolution du le board, or the corporation ha	ly adopted by its board of directors or by an officer so is been notified in writing of the change.
/s/ Ashley Kadey		Ashley Kadey, CFO
Signatur	e of an officer or director	Printed or typed name and title
I further agree t of my duties, an document is bei corporation has	the appointment as registered o comply with the provisions of I am familiar with and acce ng filed merely to reflect a cho been notified in writing of the n Service Company	l agent and agree to act in this capacity. of all statutes relative to the proper and complete performanc pt the obligation of my position as registered agent. Or, if thi ange in the registered office address, I hereby confirm that the is change.
By: Ymare?	-Kubi	5/8/2024
J	nature of Registered Agent	Date
Ту	ped or Printed Name	

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, Fl. 32314

* * * FILING FEE: \$35.00 * * *