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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BUSH ROSS, P.A.
Account Number : I19990000150
Phone : (813)224-9255
Fax Number : (813)223-9620

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## REGISTERED AGENT CHANGE VAUGHN FAMILY LIMITED PARTNERSHIP

Certificate of Status	0
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## LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

12/27/19	199	<sub>2</sub> A9900000	2209
	iling/registration in Florida	Florida docume	
The name of the	e registered agent and the registered officate:	ee address as shown on the r	ecords of the Florida
· F · · · · · · · · · · · · · · · · · ·	Peter J Kelly		
	Name		
	1801 N Highland Av	ve	
	Address		
	Tampa, FL 33602		
	City, State and	Zip	
. The name and	Florida street address of the new registere	ed agent and/or office:	207
	BUSH ROSS REGISTERED AGEN	IT SERVICES, LLC	2025 SEP
	Name		- 10 - 10
	1801 N Highland Av	ve	i di
	Florida street address (P.O. B	lox not acceptable)	
	Tampa	FL 33602	
	City, State and	·	611

Spinature of General Partner

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 an accept the obligations of my position as registered agent.

By: Peter J. Kelly, VP of Registered Agent

Signature of Registered Agent

Filing Fee: \$35.00 Certified Copy (optional): \$52.50