L17000027330

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

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2023 MAY 23 PM 3:47

2023 MAY 23 PM 2:57

STATE
FL

FLORIDA CAPITAL COURIER SERVICES, INC

2330 CLARE DRIVE

TALLAHASSEE, FL 32309

(850) 524-5437

(850) 524-6243

Please use funds from this account: I20210000160: $25.00

Authorization Signature: :

13225 SOUTHFIELDS ROAD HOLDINGS LLC **L17000027230**

BUSINESS NAME DOCUMENT #

___ Certified Copy

____ Certificate of Status

NEW FILINGS

____Profit Corp
____Not for Profit
___Limited Liability
____Domestication
____Other
____CORP
___ LLLP

AMMENDMENTS

__Amendment
___Resignation of R.A. Officer/Director
_X_Change of Registered Agent
___Revocation of Dissolution
___Merger
___Articles of Conversion
___ Amended and restated Articles
___ Statement of Authority

OTHER FILINGS

___ Annual Report

___ Fictitious Name

___ APOSTILLE

___ Country

REGISTERATION/QUALIFICATIONS

____ Foreign filing
____ Limited Partnership
____ Reinstatement

___Other

EXAMINER'S INITIALS:_____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 13225 Southfields Road Holdings LLC.
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing

Please return all correspondence concerning this matter to the following

Arthur C. O'Brien
Name of Person

13225 Southfields Road Holdings LLC
Firm/Company

13225 Southfields Road
Address

Wellington FL, 33414
City/State and Zip Code

arthurcobrienmail@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Arthur C. O'Brien at 845 667-0571
Name of Person Area Code & Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

X $25 Filing Fee ☐ $55 [illegible] Certified Copy

INHS18 (2-14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 60[illegible], the undersigned limited liability company submits the following statement in order to change its [illegible] registered agent, or both, in the State of Florida

1. Name of the limited liability company: 13225 Southfields Road Holdings LLC

2. (a) ______________________ ______________________

Principal office address of limited liability company (Note: MUST BE STREET ADDRESS) | Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)

3. May 23, 2023 — Date of filing/registration in Florida

4. L17000027230 — Document number

5. (a) Joshua Pinsky

Registered Agent and Registered Office shown on the record [illegible] State

6499 Powerline Rd, Fort Lauderdale FL, 33309

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

"Rosenberg + Pinsky" 6499 Powerline Rd, #304

Fort Lauderdale, FL 33309

(b) Arthur C. O'Brien

Enter name of NEW Registered Agent and/or NEW Registered Office [illegible]

Arthur C. O'Brien

NEW Registered Office Address:

13225 Southfields Road

Wellington, FL 33414

FILED
2023 MAY 23 PM 2:57
SECRETARY OF STATE
TALLAHASSEE, FL

If the limited liability company is not organized under the [illegible] of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[signature] — Signature of a member or authorized representative [illegible]

Arthur C. O'Brien — Printed or typed name of signee

I hereby accept the appointment as registered agent [illegible] capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete [illegible] duties, and I am familiar with and accept the obligations of my position as registered agent as provided [illegible] 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address [illegible] that the limited liability company has been notified in writing of this change.

[signature] — Signature of Registered Agent

Division of Corporations [illegible] Tallahassee, FL 32314

FILING [illegible]

INHS18 (2/14)