119000150576

Office Use Only



200336623782

11/12/19--01006--007 **25.00

2019 NOV 12 AM 9: 54
SECRETURE OF STATE
TALL AHASSEC, FLORIDA

A SINKED

COVER LETTER

TO: Registration Section **Division of Corporations** 26645 COUNTY ROAD LLC SUBJECT: 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: CHRISTOPHER S. TROESCH Name of Person Firm/Company 2500 N OCEAN BLVD Address POMPANO BEACH, FL 33062 City/State and Zip Code CTROESCH@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: CHRISTOPHER S. TROESCH Area Code & Daytime Telephone Number Name of Person STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: **☑** \$25 Filing Fee ☐ \$55 Filing Fee & 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 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

l. Na	ame of the limited liability company: 26645 COUN	TY RC	AD LLC	
2. (a)	26645 COUNTY ROAD LLC	(_{b)} 26645 C	COUNTY ROAD LLC
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	2500 N OCEAN BLVD	_	2500 N	OCEAN BLVD
	POMPANO BEACH, FL 33062	_	РОМРА	NO BEACH, FL 33062
			FL-L1900	0150576
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	AGENTS AND CORPORATIONS, INC			
(,	Registered Agent and Registered Office shown on the records of the	he Florid	a Dept. of State	· ::
	Registered Office Address (MUST RE FLORIDA STREET A 300 FIFTH AVE. SOUTH STE 101-330	<u>DDRES</u>	<u>S)</u>	
	NAPLES FI	34012		• -
(b)	CHEISTOPHER S TROESCH Enter name of NEW Registered Agent and/or NEW Registered Office address: CHRISTOPHER S. TROESCH		FIL 2019 NOV 12 SECRETIVES ALLAMASSEE.	
	NEW Registered Office Address:			
	2500 N OCEAN BLVD			75 is C
	POMPANO BEACH , FL	33062		
the cha agent v was/we the ard Signal I herei provisi the obl	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia creauthorized by an affirmative vote of the members of cles of organization or the operating agreement of the law accept the appointment as registered agent and agreement of a statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a phange in the registered office address, I have in writing of mix change.	the reg bility c f the lir limited CH	istered office ompany, it is nited liability liability com IRISTOPH	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in apany. ER S. TROESCH Printed or typed name of signee

Signature of Registered Agent