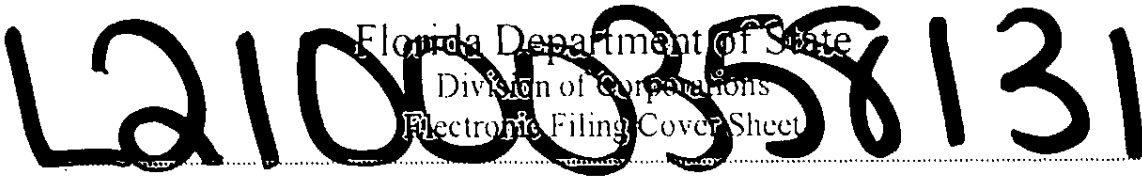


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Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000407877 3)))



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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : FIRST COAST CORPORATE SERVICES
Account Number : I20240000035
Phone : (904)490-0391
Fax Number : (706)310-8269

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

RECEIVED
 2024 DEC 11 PM 3:21
 DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA

LLC REGISTERED AGENT CHANGE TURNSTONE TURKEY CREEK WAY GP, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

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December 9, 2024

FLORIDA DEPARTMENT OF STATE

Division of Corporations

TURNSTONE TURKEY CREEK WAY GP, LLC
56 EAST NORTH AVENUE, SUITE 100
NORTHLAKE, IL 60164US

SUBJECT: TURNSTONE TURKEY CREEK WAY GP, LLC
REF: L21000358131

We have received your electronically transmitted document. However, the document was submitted under the wrong electronic filing type and cannot be processed by this office.

To proceed, you must abandon this filing and resubmit your filing under the appropriate electronic filing type.

The fax audit sheet submitted is for a corporation. Please submit a fax audit sheet titled "LLC REGISTERED AGENT CHANGE".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly
Regulatory Specialist II

FAX Aud. #: H24000402095
Letter Number: 124A00026550

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Turnstone Turkey Creek Way GP, 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:

KATHY BUTLER
Name of Person

UNIVERSAL REGISTERED AGENTS, INC.
Firm/Company

12900 METCALF, SUITE 140
Address

OVERLAND PARK, KS 66221
City/State and Zip Code

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

For further information concerning this matter, please call:

Kathy Butler at (855-236-9172)
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:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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.

1. Name of the limited liability company: Turnstone Turkey Creek Way GP, LLC

2. (a) Principal office address of limited liability company
(Note: MUST BE STREET ADDRESS)
56 East North Avenue, Suite 100
Northlake, IL 60164

(b) Mailing address of limited liability company
(Note: MAY BE POST OFFICE BOX)

3. 08/09/2021 Date of filing/registration in Florida
4. L21000358131 Document number

5. (a) Hartman, Michael
Registered Agent and Registered Office shown on the records of the Florida Dept. of State

8914 Puerto Del Rio Drive
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
#303
Cape Canaveral, FL 32920

(b) Universal Registered Agents, Inc.
Enter name of NEW Registered Agent and/or NEW Registered Office address

NEW Registered Office Address
1317 California Street
Tallahassee, FL 32304

If the limited liability company is not organized under the laws of the State 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.

Sue Wiemer

Signature of a member or authorized representative of a member

Sue Wiemer, Asst. Secretary

Printed or typed name of signer

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 and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Kathy Butler

Signature of Registered Agent