I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

MGRM

SIGNATURE: WILLIAM L GOLDSTEIN

Electronic Signature of Signing Authorized Person(s) Detail

1427 BEACON STREET

DOCUMENT# L05000083820

NEW SMYRNA BEACH. FL 32169

**Current Mailing Address:** 

1427 BEACON STREET

NEW SMYRNA BEACH, FL 32169 US

**Current Principal Place of Business:** 

# FEI Number: 20-3419748

### Name and Address of Current Registered Agent:

Entity Name: CHASEHOUSE PROPERTIES, LLC

GOLDSTEIN, WILLIAM 1427 BEACON STREET NEW SMYRNA BEACH, FL 32169 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

### Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	GOLDSTEIN, WILLIAM L	Name	GOLDSTEIN, LAURA L
Address	1427 BEACON STREET	Address	1427 BEACON STREET
City-State-Zip:	NEW SMYRNA BEACH FL 32169	City-State-Zip:	NEW SMYRNA BEACH FL 32169

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REP	ORT

## FILED May 01, 2015 Secretary of State CC1013990587

Certificate of Status Desired: No

Date

05/01/2015 Date