Current Mai	ling Addrossy			
	ling Address:			
PO BOX 210	)0 E, FL 33839			
	2, 12 00000			
FEI Number: 20-2880391 Certific			Certificate of Status Des	sired: No
Name and A	Address of Current Registered Age	nt:		
DESROCHERS 2504 AVENUE WINTER HAVE				
2504 AVENUE WINTER HAVE	G NW N, FL 33880 US			
2504 AVENUE WINTER HAVE The above named	G NW N, FL 33880 US d entity submits this statement for the purpose of cha	anging its registered office or regis	tered agent, or both, in the State of F	lorida.
2504 AVENUE WINTER HAVE The above named	G NW N, FL 33880 US	anging its registered office or regis	tered agent, or both, in the State of F	ilorida. 06/11/202
2504 AVENUE WINTER HAVE The above named	G NW N, FL 33880 US d entity submits this statement for the purpose of cha	anging its registered office or regis	tered agent, or both, in the State of F	
2504 AVENUE WINTER HAVE The above named SIGNATURE	G NW N, FL 33880 US d entity submits this statement for the purpose of cha E: CHRISTOPHER DESROCHERS	anging its registered office or regis	tered agent, or both, in the State of F	06/11/202
2504 AVENUE WINTER HAVE <i>The above named</i> SIGNATURE Authorized	G NW N, FL 33880 US d entity submits this statement for the purpose of cha E: CHRISTOPHER DESROCHERS Electronic Signature of Registered Agent	anging its registered office or regis	tered agent, or both, in the State of F	06/11/202
2504 AVENUE WINTER HAVE The above named SIGNATURE Authorized Title	G NW N, FL 33880 US d entity submits this statement for the purpose of cha E: <u>CHRISTOPHER DESROCHERS</u> Electronic Signature of Registered Agent <b>Person(s) Detail :</b>			06/11/202
2504 AVENUE WINTER HAVE The above named SIGNATURE	G NW N, FL 33880 US d entity submits this statement for the purpose of chi E: <u>CHRISTOPHER DESROCHERS</u> Electronic Signature of Registered Agent <b>Person(s) Detail :</b> MGR	Title	MANAGER	06/11/202

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.

SIGNATURE: MARC HOWARD

MGR

06/11/2020

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000016140

Entity Name: RECREATIONAL LANDS, LLC

## Current Principal Place of Business:

3014 SPIRIT LAKE DR WINTER HAVEN, FL 33880 FILED Jun 11, 2020 Secretary of State 9066317816CC

Date