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: SCOTT D WARREN

Electronic Signature of Signing Authorized Person(s) Detail

109 S. BEND DR.

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:

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## Author

Title	MGR	Title	MGRM
Name	NEWMAN, MICHAEL S	Name	WARREN, SCOTT D MD
Address	109 SOUTH BEND DRIVE	Address	6890 BELFORT OAKS PLACE
City-State-Zip:	PONTE VEDRA BEACH FL 32082	City-State-Zip:	JACKSONVILLE FL 32216

Electronic Signature of Registered Agent				
rized Person(s) Detail :				
MGR	Title	MGRM		
NEWMAN, MICHAEL S	Name	WARREN, SCOTT D MD		

### **Current Principal Place of Business:** 6890 BELFORT OAKS PLACE

DOCUMENT# L07000086399

JACKSONVILLE, FL 32216

## **Current Mailing Address:**

6890 BELFORT OAKS PLACE JACKSONVILLE, FL 32216 US

## FEI Number: 26-0838545

# Name and Address of Current Registered Agent:

Entity Name: XEROS PROPERTIES HOLDINGS, LLC

NEWMAN, MICHAEL S PONTE VEDRA BEACH, FL 32082 US

# Certificate of Status Desired: No

Date

04/24/2024

## FILED Apr 24, 2024 Secretary of State 8680700893CC

Date