| 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: SALLY J ROBERTS

Electronic Signature of Signing Authorized Person(s) Detail

Entity Name: 4 POINTS PROPERTY DEVELOPMENT, LLC

DOCUMENT# L15000010167

Current Principal Place of Business:

3595 AZALEA DRIVE PERRY, FL 32347

Current Mailing Address:

3595 AZALEA DRIVE PERRY, FL 32347 US

FEI Number: 47-2856170

Name and Address of Current Registered Agent:

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

ROBERTS, SALLY 3595 AZALEA DR. PERRY, FL 32347 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: | SALLY ROBERTS | | | 05/01/2017 | |
|-------------------------------|--|-----------------|------------------|------------|--|
| | Electronic Signature of Registered Agent | | | Date | |
| Authorized Person(s) Detail : | | | | | |
| Title | AMBR | Title | AMBR | | |
| Name | ROBERTS, DAVID W JR. | Name | ROBERTS, SALLY J | | |
| Address | 3595 AZALEA DR. | Address | 3595 AZALEA DR. | | |
| City-State-Zip: | PERRY FL 32347 | City-State-Zip: | PERRY FL 32347 | | |

05/01/2017 AMBR

Certificate of Status Desired: No

FILED May 01, 2017 Secretary of State CC7609291994

Date