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 ROBERTS	AMBR	04/11/2018				

SIGNATI	JRE: SALI	YR	OBERTS

Electronic Signature of Signing Authorized Person(s) Detail

## FEI Number: 47-2856170

### Name and Address of Current Registered Agent:

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			04/11/2018	
	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		

**Current Mailing Address:** 

3595 AZALEA DRIVE PERRY, FL 32347 US

# 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000010167

Entity Name: 4 POINTS PROPERTY DEVELOPMENT, LLC

# **Current Principal Place of Business:**

3595 AZALEA DRIVE PERRY, FL 32347

Certificate of Status Desired: No

FILED Apr 11, 2018 Secretary of State CC6520991296

Date