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.

AMBR

SIGNATURE: SALLY ROBERTS

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L15000010167

Current Mailing Address:

3595 AZALEA DRIVE PERRY, FL 32347 US

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			10/24/2016	
	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		

Certificate of Status Desired: No

10/24/2016

Date

FILED Oct 24, 2016

Secretary of State

CR6609876338

2016 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

Entity Name: 4 POINTS PROPERTY DEVELOPMENT, LLC