## 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: SANDRA G DEVINE

Electronic Signature of Signing Authorized Person(s) Detail

MEMBER

01/08/2024

# Entity Name: DEVINE PROPERTY MANAGEMENT, LLC

## **Current Principal Place of Business:**

1623 SANTIAGO CIRCLE NAPLES. FL 34113

#### **Current Mailing Address:**

DOCUMENT# L15000184614

**1623 SANTIAGO CIRCLE** NAPLES. FL 34113 US

### FEI Number: 47-5517169

#### Name and Address of Current Registered Agent:

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DEVINE, SANDRA G 1623 SANTIAGO CIRCLE NAPLES, FL 34113 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:      | SANDRA G DEVINE                          |                 | 01/08/2024           |      |
|-------------------------------|-----------------|--|-----------------|----------------------|------|
|                               |                 | Electronic Signature of Registered Agent |                 |                      | Date |
| Authorized Person(s) Detail : |                 |  |                 |                      |      |
|                               | Title           | AMBR                                     | Title           | AMBR                 |      |
|                               | Name            | SAPOZNICK, JEFFERY L                     | Name            | DEVINE, SANDRA G     |      |
|                               | Address         | 1552 VIZCAYA LANE                        | Address         | 1623 SANTIAGO CIRCLE |      |
|                               | City-State-Zip: | NAPLES FL 34113                          | City-State-Zip: | NAPLES FL 34113      |      |
|                               |                 |  |                 |                      |      |

FILED Jan 08, 2024 Secretary of State 8783090951CC

Certificate of Status Desired: No

Date