PORT SAINT LUCIE, FL 34953 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:	IRIS LOPEZ			03/19/2018
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	AMBR	Title	AMBR	
Name	GONZALEZ, ERLYN J	Name	LOPEZ, IRIS	
Address	4356 SW SAVONA BLVD	Address	4356 SW SAVONA BLVD	
City-State-Zip:	PORT SAINT LUCIE FL 34953	City-State-Zip:	PORT SAINT LUCIE FL 34953	

Current Mailing Address:

4469 TREEHOUSE LN

TAMARAC, FL 33319

E-9

DOCUMENT# L16000181545

Entity Name: 4469 TREEHOUSE LN E-9 LLC

Current Principal Place of Business:

4356 SW SAVONA BLVD PORT SAINT LUCIE, FL 34953

FEI Number: NOT APPLICABLE

Name and Address of Current Registered Agent:

IRIS, LOPEZ 4356 SW SAVONA BLVD P

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: IRIS LOPEZ

VICE PRESIDENT

03/19/2018

Electronic Signature of Signing Authorized Person(s) Detail

FILED Mar 19, 2018 Secretary of State CC1101322290

Certificate of Status Desired: No

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Date