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: GENA L SMITH

Electronic Signature of Signing Authorized Person(s) Detail

AUTHORIZED MEMBER 06/09/2020

Entity Name: CLASSICAL CHARTER MANAGEMENT GROUP, LLC

Current Principal Place of Business:

1430 9TH STREET SW NAPLES, FL 34117

Current Mailing Address:

DOCUMENT# L17000197641

1430 9TH STREET SW NAPLES, FL 34117 US

FEI Number: 82-3042429

Name and Address of Current Registered Agent:

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

HULL, DAVID 1430 9TH STREET SW NAPLES, FL 34117 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:	DAVID HULL			06/09/2020
	Electronic Signature of Registered Agent			
Authorized Person(s) Detail :				
Title	AMBR	Title	AMBR	
Name	HULL, DAVID L JR.	Name	SMITH, GENA L	
Address	1430 9TH STREET SW	Address	1820 FLORIDA CLUB CIR #2206	
City-State-Zip:	NAPLES FL 34117	City-State-Zip:	NAPLES FL 34112	

Certificate of Status Desired: No

FILED Jun 09, 2020 Secretary of State 8932910873CC

Date