ATLANTIC BC	.,			
	iling Address:			
1400 MAYP ATLANTIC E	ORT RD. BCH, FL 32233 US			
FEI Numbe	r: 59-0690965		Certificate of Status Desir	red: No
Name and /	Address of Current Registered Agent:			
LYNCH, KIRT 1404 MAYPOR	T RD			
ATLANTIC BCI	H, FL 32233 US			
	H, FL 32233 US d entity submits this statement for the purpose of changing	its registered office or regis	tered agent, or both, in the State of Flor.	ida.
The above name		its registered office or regis	tered agent, or both, in the State of Flor	
The above name	d entity submits this statement for the purpose of changing	its registered office or regis	tered agent, or both, in the State of Flor.	^{ida.} 01/23/2023 Date
The above name SIGNATURI	d entity submits this statement for the purpose of changing E: KIRT W LYNCH	its registered office or regis	tered agent, or both, in the State of Flor.	01/23/2023
The above name SIGNATURI	d entity submits this statement for the purpose of changing E: KIRT W LYNCH Electronic Signature of Registered Agent	its registered office or regis	tered agent, or both, in the State of Flor.	01/23/2023
The above name SIGNATURI Authorized	d entity submits this statement for the purpose of changing E: KIRT W LYNCH Electronic Signature of Registered Agent Person(s) Detail :			01/23/2023
The above name SIGNATURI Authorized Title	d entity submits this statement for the purpose of changing E: KIRT W LYNCH Electronic Signature of Registered Agent Person(s) Detail : MGR	Title	AP	01/23/2023
The above name SIGNATURI Authorized Title Name Address	d entity submits this statement for the purpose of changing E: KIRT W LYNCH Electronic Signature of Registered Agent Person(s) Detail : MGR LYNCH, KIRT W	Title Name Address	AP LYNCH, PALMER C	01/23/2023 Date

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: KIRT LYNCH MANGER

Electronic Signature of Signing Authorized Person(s) Detail

1400 MAYPORT RD ATLANTIC BCH, FL 32233

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000217061

Entity Name: 1400 MAYPORT ROAD . LLC.

Current Principal Place of Business:

FILED Jan 23, 2023 **Secretary of State** 4529778794CC

01/23/2023

Date