that my name appears above, or on an attachment with all other like empowered. SIGNATURE: LINH D HO MANAGER

Title	MGR	Title	MGR
Name	HO, LINH D	Name	HO, PHUC T
Address	6784 EDGEWORTH DRIVE	Address	6784 EDGEWORTH DRIVE
City-State-Zip:	ORLANDO FL 32819	City-State-Zip:	ORLANDO FL 32819

CRAMER, CHARLES W 1420 EDGEWATER DRIVE SUITE 200 ORLANDO, FL 32804 US

Current Mailing Address:

6784 EDGEWORTH DRIVE ORLANDO, FL 32819

Entity Name: 1305 N MILLS AVE, LLC

Current Principal Place of Business:

1420 EDGEWATER DRIVE SUITE 200 ORLANDO, FL 32804 US

FEI Number: 92-3972722

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

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.

Authorized Person(s) Detail :

SIGNATURE:

Mar 15, 2024 Secretary of State 5031022102CC

FILED

Certificate of Status Desired: No

Date

Electronic Signature of Signing Authorized Person(s) Detail

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

03/15/2024