

A12000000961

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195  
REFERENCE : 159856 7779145  
AUTHORIZATION :   
COST LIMIT : \$ 35.00

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ORDER DATE : October 22, 2021  
ORDER TIME : 5:23 PM  
ORDER NO. : 159856-127  
CUSTOMER NO: 7779145

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CHANGE OF AGENT

NAME: RIDGE ROAD PARTNERS, LLLP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER: \_\_\_\_\_

**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP  
STATEMENT OF CHANGE OF REGISTERED OFFICE OR  
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. RIDGE ROAD PARTNERS, LLLP

Name of Limited Partnership or Limited Liability Limited Partnership

2. 12/21/2012

Date of filing/registration in Florida

3. A12000000961

Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

ROMERO, RAFAEL G

Name

2020 Salzedo Street, 5th Floor

Address

CORAL GABLES, FL 33134

City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

Corporation Service Company

Name

1201 Hays Street

Florida street address (P.O. Box not acceptable)

Tallahassee

FL 32301

City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

Jill E. Cilmi  
Signature of ~~General Partner~~

Jill Cilmi, Authorized Person on behalf of Ridge Road Associates, LLC, General Partner

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

Grace E. Kirby  
Signature of Registered Agent  
Grace E. Kirby, Asst. Vice President of Corporation Service Company

**Filing Fee: \$35.00**

**Certified Copy (optional): \$52.50**

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