Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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Email Address:

REGISTERED AGENT CHANGE SEA SALT PINES APARTMENTS, LP

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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.	SEA SALT PINES	AP ARTMENT	rs, lp		
Name	of Limited Partnership or Lie	nited Laability	Limited Partnersh	b	
2.	0/20/2020	3.	A200000	00467	
Date of filing/registration in Florida		Florida docur		ment number	
4. The name of the regis Department of State.	stered agent and the registered	office address	as shown on the re	ecords of the Florida	
	Lenn, F	David F.			
	Na	me			
	390 N. ORANGE	AVE, STE, 14	40u		
	Add	ress			
_	ORLANDO, FL 32801				
	City, Stat	e and Zip			
5. The name and Florid	a street address of the new reg	astered agent a	nd/or office:		
	C T Corpora	tion System			
	Na	me			
	1200 South Pir	ie Island Road			
-	Florida street address (P	O Box not ac	ceptable)		
	Plantation,	ŀ.	L 33324	V2- ~ ~	
-	City, Stat	e and Zip		ALL ALL	
Jourseymed by:	effective when filed by the F	lorida Departm	ent of State.	A C	
Kenze Sandell				27	=
Signature of General Pa	rtner			2 P	ILL
comply with the provision	ointment as registered agent a ons of all statutes relative to th in accept the obligations of my	ie proper and c	omplete performa	2021 DEC 27 PM 12: 48 SCHOOL SECTOR OF STATE ALL WHASSEL FREEBOOM for of my duffer	
Signature of Registered	Agent				
Denise Bell	, Asst Secy				

\$35.00

Filing Fee:

Certified Copy (optional): \$52.50