2/20/24, 10:24 AM

From: Alexis Gregor

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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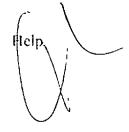
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nbarker@renderotrust.com Email Address:

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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of char	nge is submitter	l for a corporation org	1502, 607, 1508, or 617, 1508, Florida Statutes, purized under the laws of the State of Florida	H
			istered agent, or both, in the State of Florida.	
1. The name of the	he corporation:	Gopher Ridge Grove	es, me.	· <del></del>
2. The principal	office address:_	2550 Goodlette Rd. N	., Naples, Florida 34103	
3. The mailing a	ddress (if differ	ent): 3665 Fast Bay Di	rive, Suite 204, MB 435, Largo, FL 33771	
4. Date of incorp	oration/qualific	ation: <u>6/2/1986</u>	Document munber: 118766	***
5. The name and	street address o		d agent and registered office on file with the	
	Drumm, The	mas J.		
				<b>20</b> 2
				2024 FEB
6. The name and (if changed):	street address of the new registered agent (if changed) and for registered office			20 (HA)
	Business Filin	gs Incorporated		<b>مند</b> 1 ت
	1200 South Pine Island Road			9. O
	PO Box NOT acceptable			
	Plantation, Flo	orida 33324		
The street addre	ss of its registe be identical.	red office and the stre	eet address of the business office of its regist	ered agent,
Such change wa authorized by th	s authorized by e board, or the	resolution duly adop corporation has been	ted by its board of directors or by an officer notified in writing of the change,	\$0
1000			William Thomas, Vice President	
I hereby accept I further agree t of my duties, and document is heir corporation has	the appointme a comply with t d I am familiar og filed merely been notified i	it as registered agent i the provisions of all st with and accept the o to reflect a change in n writing of this chang	and agree to act in this capacity. tannes relative to the proper and complete p obligation of my position as registered agent the registered affice address, I hereby confi ge.	erformance Or, if this im that the
(MA			5th day of February, 2024	
Sign	ianire of Registered.	Agent	Date	
If signing on bel Chris Das, AVI	•	n		
ту	pied or Printed Name	<del>•</del>		

\* \* \* FILING FEE: \$35.00 \* \* \*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BON 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)