DOCU	MENT # L00000015	5015	• • • • •		FI	LED		
LDG GO CUSTOM HOMES, LLC					01 MAY -1 PM 5: 14			
LDG GO CUSTOM HOMES, DEC								
Principal Place of Business Mailing Addres			iress		SECRETARY OF STATE TALLAHASSEE. FLORIDA			
		·						
Principal Place of Business C/O 3. Mailing Address			c, o	_				
Landmark Development Group Suite, Apt. #, etc. 5668 Strand Court, #108		Landmark Development Group Suite, Apt. #, etc. 5668 Strand Court, #108		<u>p</u>	DO NOT WRITE IN THIS SPACE			
City & State Naples, FL		City & State Naples, FL		l l	4. FEI Number Applied For S9-3685030 Not Applicable			
Zip 34110	Country US	Zip Country 34110 US		5. Certi	5. Certificate of Status Desired			
	6. Name and Address of Current R			7. Nam	e and Address of New Re	gistered Agent		
CLASP	Inc.		Name				·	
	amiami Trail North, 4t , FL 34103	Street Address (P.O. Box Number is Not Acceptable)						
			City			FL Zip	Code	
8. The above	named entity submits this statement for	the purpose of changing it	s egistered office or regis	stered agent,	or both, in the State of Flori	da.		
SIGNATURE	Signature, typed or printed name of registered agent and	d title if applicable. (NO	TF Registered Agent signature requ	uired when reinstati	ng)	DATE		
		FILE N	CWIII FEE IS \$50.0	nn	90000042 -05/21/	0101187	013	
	•		a /able to Departmen		*****5]:{{}} ****	: * 50.00 ~ ~	
9.	MANAGING MEMBER	RS/MEMBERS	1 10.		ADDITIONS/C	CHANGES		
TITLE	MGR	TITLE		7/25(110110)	☐ Char	nge Addition		
NAME STREET ADDRESS	Landmark Development 5668 Strand Court, #		Name Street address					
CITY-ST-ZIP	Naples, FL 34110		CITY-ST-ZIP				nge Addition	
TITLE NAME		☐ Delete	TITLE NAME			☐ Char	nge 🗌 Addition { {	
STREET ADDRESS			STREET ADDRESS City-St-Zip				}	
TITLE		Delete	TITLE			Char	nge 🔲 Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					
TITLE NAME		☐ Delete	TITLE NAME			☐ Char	ige 🔲 Addition	
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP		F7.0	CITY-ST-ZIP			☐ Chan	ge 🔲 Addition	
TITLE NAME		☐ Delete	NAME				ige () Addition	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP					
TITLE		Delete	TITLE			☐ Chan	ge 🔲 Addition	
NAME			NAME CYDEST ADDRESS					
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP					
indicated	erify that the information supplied with the on this report is true and accurate and the company or the receiver or trustee e Landmark Deve 1 opine:	at my signature shall have	the same legal effect as i	if made under	oath: that I am a managin	urther certify that the grant or man	ne information ager of the	
	1 40		_					
SIGNAT		IGNING MANAGING MEMBER, MA	'Arthur Shafr		Manager	941-	<u>-597–840</u> 0	