L04000050316

| (Requestor's Name) | | | | | | |
|---|--|--|--|--|--|--|
| (Address) | | | | | | |
| (Address) | | | | | | |
| (City/State/Zip/Phone #) | | | | | | |
| PICK-UP WAIT MAIL | | | | | | |
| (Business Entity Name) | | | | | | |
| (Document Number) | | | | | | |
| Certified Copies Certificates of Status | | | | | | |
| Special Instructions to Filing Officer: | | | | | | |
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PILED 2020 JUL 27 AMII: 4.6 SECRETARY OF STATE

JQ 01/21/20

COVER LETTER ,

| | stration Section sion of Corporations | | | | | | | |
|----------------------------------|---|--------------|---|--|--|--|--|--|
| SUBJECT: | Prosperity Land Holdings, LLC | | | | | | | |
| SUBJECT | Name of Limited Liability Company | | | | | | | |
| Dear Sir or N | Madam: | | | | | | | |
| The enclosed | l Registered Agent/Registered Off | ice Change | and fee(s) are submitted for filing. | | | | | |
| Please return | all correspondence concerning th | is matter to | the following: | | | | | |
| Richene Olive | er | | | | | | | |
| | Name of Person | | | | | | | |
| Adams and R | eese LLP | | | | | | | |
| | Firm/Company | | | | | | | |
| 501 Riverside | Avenue, Suite 601 | | | | | | | |
| | Address | · | | | | | | |
| Jacksonville, | FL 32202 | | | | | | | |
| | City/State and Zip Code | | | | | | | |
| richene.oliver | - | | | | | | | |
| E-mail | address: (to be used for future ann | ıual report | notification) | | | | | |
| For further in | nformation concerning this matter, | please call | : | | | | | |
| Richene Olive | er | 904 at (| 355-1700) | | | | | |
| | Name of Person | | Area Code & Daytime Telephone Number | | | | | |
| Regi: Divis Clift: 2661 | EET/COURIER ADDRESS: stration Section sion of Corporations on Building Executive Center Circle thassee, Florida 32301 | | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 | | | | | |
| Enci | Enclosed is a check for the following amount: | | | | | | | |
| ⊠ \$2 | 25 Filing Fee | C | \$55 Filing Fee & Certified Copy | | | | | |

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

| 1. Na | ame of the limited liability company: Prosperity Land | Holdings, | LLC | | | | |
|---|---|--|--|--|--|--|--|
| | | ., | | | | | |
| 2. (2) | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | _ ` | · / | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | | | |
| | 1301 Riverplace Boulevard, Suite 2600 | | 1301 Rive | erplace Boulevard, Suite 2600 | | | |
| | Jacksonville, FL 32207 | _ | Jacksonvil | lle. FL 32207 | | | |
| | 07/26/2004 | | 1.04000050 | 316 | | | |
| 3. | Date of filing/registration in Florida | 4. | | Document number | | | |
| 5. (a) | | | | | | | |
| J. (u, | Registered Agent and Registered Office shown on the records of | f the Florid | a Dept. of Stat | te: | | | |
| | Lawton E. Bassett III | | | _ | | | |
| | Registered Office Address (MUST BE FLORIDA STREET ADDRESS) | | | | | | |
| | 1301 Riverplace Boulevard, Suite 2600 | | | AL O | | | |
| | Jacksonville , Fl | L_32207 | | EL 27 2020 JUL 27 SECRETAR TALLAHA | | | |
| (b) | SSC 🕦 📆 | | | | | | |
| | C T Corporation System | | ······ | TATE FL | | | |
| | NEW Registered Office Address: | | | _ | | | |
| | 1200 South Pine Island Road | | | _ | | | |
| | Plantation, FI | L_33324 | | _ | | | |
| the cha agent v was/w the art | imited liability company is not organized under the lange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the street of a member or authorized representative of a member | of the reginability confidence limited | stered offic ompany, it i nited liabilit liability cor di Lewis, Sec | te and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany. Cretary of Ameris Bancorp Inc. (MGR) Printed or typed name of signce | | | |
| provisi the obj to mer notifie | by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d'in writing of this change orporation System | e perform ed for in hereby c | ance of my Chapter 60. confirm that | pacity. I jurther agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been McCroy, Assistant Secretary | | | |

Division of Corporations • P.O. Bar 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent