

vision of Corporation

<https://efile.sunbiz.org/scripts/entlcovr.exe>**L04060062063**

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000076266 3)))



H180000762663ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : UNITED AGENT GROUP INC.
Account Number : 120160000086
Phone : (561)508-5033
Fax Number : (561)694-1639

2018 MAR -8 A 10:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

LLC REGISTERED AGENT CHANGE
REGENCY PROTECTIVE TRUST, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

RECEIVED

2018 MAR -8 AM 11:11

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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. Name of the limited liability company: <u>Regency Protective Trust, LLC</u>	
2. (a) <u>ONE INDEPENDENT DRIVE</u>	(b) <u>ONE INDEPENDENT DRIVE</u>
Principal office address of limited liability company: (Note: <u>MUST BE STREET ADDRESS</u>)	Mailing address of limited liability company: (Note: <u>MAY BE POST OFFICE BOX</u>)
<u>SUITE 114</u>	<u>SUITE 114</u>
<u>JACKSONVILLE, FL 32202-5019</u>	<u>JACKSONVILLE, FL 32202-5019</u>
3. <u>08/20/2004</u>	4. <u>L04000062085</u>
Date of filing/registration in Florida	Document number
5. (a) <u>Registered Agent and Registered Office shown on the records of the Florida Dept. of State:</u>	
<u>F&L CORP</u>	
Registered Office Address <u>(MUST BE FLORIDA STREET ADDRESS)</u>	
<u>ONE INDEPENDENT DRIVE STE 1300</u>	
<u>JACKSONVILLE, FL 32202</u>	
(b) <u>United Agent Group Inc.</u>	
Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address:</u>	
<u>NEW Registered Office Address:</u>	
<u>11360 Prosperity Farms Road #221E</u>	
<u>Palm Beach Gardens, FL 33410</u>	

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Savannah Montalban, Attorney-in-Fact

Printed or typed name of signer

Signature of a member or authorized representative of a member

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 as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Savannah Montalban, Special Secretary

Signature of Registered Agent

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

FILED
2018 MAR - 8 A 10:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA