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.

(((H21000212755 3)))



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 : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803

Fax Number : (855)330-1010

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 FREELAND SYSTEMS, L.L.C.

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

MAY 2 8 2021

A. LUNT

Electronic Filing Menu Corporate Filing Menu

Help

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: FREELA	ND SYSTE	MS, L.L.C.		
2. (a	, 15440 Kilburn Court	_(b) 2648 V	(b) 2648 Weeks Avenue		
(Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited (Note: MAY BE POST		
	Westfield, IN 46074-8842	Naples,	FL 34112-5701		
	11/12/04	L040000	083728		
3.	Date of filing/registration in Florida	4.	Document number	34444	
5. (ALAN STEGEMOLLER				
J. (Registered Agent and Registered Office shown on the records of	the Florida Dept. of State	- 2:		
	133 BELLINI COURT			20 TAI	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		PILE 2021 MAY 27 TALLAHASSEI		
				HASA TI	
	NORTH VENICE	34275	-	FILEI AY 27 HASSEE	
		•	-		
(h	Registered Agents Inc.		_) H 9: 23 F STATE FLORIDA	
	Enter name of NEW Registered Agent and/or NEW Registered	d Office address:		10 A	
	7901 4th St N				
	NEW Registered Office Address:		-		
	STE 300				
		***************************************	-		
	St. Petersburg	33702	-		
the c agen was/	e limited liability company is not organized under the la hange or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited li were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	f the registered office iability company, it is of the limited liability I limited liability con	e and the business of s hereby confirmed the y company or as other	fice of the registered hat the change(s)	
\mathbb{R}_{i}	lang tark	Riley Park	Dries des sun desease	f -ious	
	naturelof a member or authorized representative of a member		Printed or typed name o	•	
prov. the o to me	reby accept the appointment as registered agent and agisions of all statutes relative to the proper and complete bligations of my position as registered agent as provide prely reflect a change in the registered office address, lied in writing of this change. Bill Havre - Assistar	ree to act in this cap e performance of my ed for in Chapter 605 hereby confirm that nt Secretary	acity. I further agreeduties, and I am fam i, F.S. Or. if this doc the limited liability c	e to comply with the iliar with and accept nument is being filed company has been	
<u>ئىك</u> Signi	nure of Registered Agent	n occiciary			

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

. . . .