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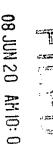
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COVER LETTER

Division of Corporations			
SUBJECT: E.J. TWELVE OAKS, L			
(Name	of Limited Liability Company)		
Dear Sir or Madam:			
Dear Sir or Madam:			
The enclosed Registered Agent/Registered (Office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning	this matter to the following:		
DOVAN W ZINODED			
BRYAN W ZINOBER (Name of Person)			
FRANKLIN STREET REAL ESTATE SERVICES	S, LLC		
(Firm/Company)			
5420 BAY CENTER DRIVE - SUITE 100			
(Address)			
TAMPA, FLORIDA 33609			
(City/State and Zip Code)			
For further information concerning this mat	ter, please call:		
BRYAN W ZINOBER	at (813) 839-7300 EXT. 314		
(Name of Person)	(Area Code & Daytime Telephone Number)		
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section		
Division of Corporations	Division of Corporations		
Clifton Building	P.O. Box 6327		
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314		
Enclosed is a check for the followi	ng amount:		
\$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy		

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

Pursuant to the provisions of sections 608.416 or 608.508, 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. Nam	ne of the limited liability company: E.J. TWELV	E OAKS, LLC	
2. (a) l	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	7: 5420 BAY CENTER DRIVE - SUITE 100 TAMPA, FLORIDA 33609	•
(b) 1	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	5420 BAY CENTER DRIVE - SUITE 100 TAMPA, FLORIDA 33609	
			• •
10/17/20	006	L06000035743	_
3. Date	e of filing/registration in Florida	4. Document number the records of the Florida Dept. of State:	} =====
5. (a)	Registered Agent and Registered Office shown on t	the records of the Florida Dept. of State:	e fair
	Registered Agent:	THOMAS C NASH	
	Registered Office Address:	625 COURT STREET SUITE 200 CLEARWATER, FL 33756	D
NEW Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	FRANKLIN STREET REAL ESTATE SERVICES LLC 5420 BAY CENTER DRIVE - SUITE 100	£	
	(MUST BE FLORIDA STREET ADDRESS)	TAMPA,FL_33609	
that after office of hereby liability limited	mited liability company is not organized under the ler the change or changes are made, the Florida stree of the registered agent will be identical. Or, in the caconfirmed that the change(s) was/were authorized by company or as otherwise provided in the articles or liability company.	t address of the registered office and the business	
	H MOGEL or typed name of signee)	_	
I hereb comply am fam F.S. Oi confirm	by accept the appointment as registered agent and a with the provisions of all statules relative to the priliar with and accept the obligations of my position r, if this document is being filed to merely reflect a contact the limited liability company has been notified	gree to act in this capacity. I further agree to oper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, change in the registered office address, I hereby I in writing of this change.	
(Signatur	of Registered Agent)		
	Division of Corporations, P.O. Box FILING FEE	· · · · · · · · · · · · · · · · · · ·	