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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Citrus Valley Investors, LCC Name of Limited Liability Company
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:
Edvard Mayer Name of Person
Citrus Valley Truestors Find Company
14/100 N Hwy 19, Suite A
Salt Springs, FL 32/34 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Fcl Mayer at (352) 685-1900 Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

☐ \$55 Filing Fee & Certified Copy

Enclosed is a check for the following amount:

\$25 Filing Fee

INHS18 (2/14)

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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	me of the limited liability company: <u>Citrus Valley Investors LLC</u>
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Salt-Springs, FL 32134
3.	9/18/2007
5. (a)	Skates, Jeffrey
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 1028
(b)	The Villages, FL 32162 Edvard Mayer
(-)	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	14100 M Highway, Suite A NEW Registered Office Address:
	Salt Springs FL 32134
the character that character the character the character the character the character than character the character than character the character the character than character than character the character than	imited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after ange or changes are made, the Florida street address of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) ere authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in icles of organization or the operating agreement of the limited liability company.
_	ature of a member or authorized representative of a member Printed or typed name of signee
provis the ob to mer	thy accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept ligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed selvent a change in the registered office address, I hereby confirm that the limited liability company has been address.
Signat	ure of Registered Agent