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(Requestor's Name)					
(Address)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

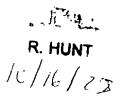
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DIVISION OF COPPERATE A



COVER LETTER

TO: Registration Section Division of Corporations	.						
SUBJECT: BROWN WATE Name of Limit	ed 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:						
JONATHAN STIDHAM, ESO Name of Person							
STIDHAM 4- STIPHAM, P	2023 OCT 16						
150 E. DAVIPSON							
BARTOW FL 3383 City/State and Zip Code	BO 12: 40						
E-mail address: (to be used for future annual report	M notification)						
For further information concerning this matter, please cal	l:						
JONATHAM STIDHAM ESW at (80) Name of Person	Area Code & Daytime Telephone Number						
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303						
Enclosed is a check for the following amount:							
S25 Filing Fee	☐ \$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. N	ame of the limited liability company: BROWN WATE	R BAR	GES	S. LLC	
2. (a)	c/o Cherokee Rose	-	(b)	c/o Cherol	kee Rose
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	 -	(1)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	895 Baptst Camp Road			895 Baptst	Camp Road
	Griffin, GA 30223			Griffin, GA	X 30223
	December 19, 2007		Į.	.070001255	25
3.	Date of filing/registration in Florida	4.	-		Document number
5. (a)	Victor J. Troiano, Esq.				
()	Registered Agent and Registered Office shown on the records of	the Flor	ida I	Dept. of State	- ::
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
	3850 Chambers				อเขียนต์ 2023 OCT
	Lake Wales,	33898			CTARY BCT 16
	Investor Co. Here. 12				in the second se
(b)	Jonathan Stidham, Esq. Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	1.7365			· · · · · · · · · · · · · · · · · · ·
	Earth name of SEW Registered Agent and/or SEW Registered	i Omce :	addı	<u>'ess</u> :	PH12: 4.0
	NEW Registered Office Address:	·			
	150 East Davidson Street				
	Bartow	33830			
agent www.was/we	mited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia tre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registe ability of of the li	red com mit	office and pany, it is ed liability	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
	2111	Vi	ctor	J. Troiano,	Esq.
Signat	ure of a member or authorized representative of a member				Printed or typed name of signee
the oblit to mere notifica	ov accept the appointment as registered agent and agrees of all statutes relative to the proper and complete gations of my position as registered agent as provided in reflect a change in the registered office address, I have in writing of this change.	neriori	nnn	ce of mod	uties, and I am familiae with and account
Signatur	Michigan Agent				
//	Division of Corporations • P.O. I	3ox 63	27•	Tallahass	see, FL 32314

FILING FEE: \$25.00