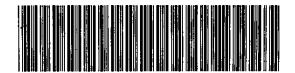


(Requestor's Name)			
(Address)			
(Address)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Dusiness Littly Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			





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D. SCOTT FEB 2 2017

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Canon Gate of Lakeland, Name of Limited Liability Company	LLC		
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:			
DAVID L. JONES Name of Person Canon Gate of Lakeland, LCC Firm/Company	2017 JAN 30 PH 5: 39 SECRETARY OF THE S		
3017 Pine Club Drive Address	7.0 4.5		
Plant City FL 33566 City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:	F II SECKEIV		
DAVID L. JONES at (863) 701-39 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	Telephone Number & O		
Enclosed is a check for the following amount:			
□ \$25 Filing Fee & Certified	д Сору		
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

rioria	u.	
1. Na	ame of the limited liability company: Canon Gate of L	skeland, LLC
2. (a)		
		address of limited liability company: ** MAY BE POST OFFICE BOX*)
	Plant City, FL Plant	City, FL
	33566	33566
	5/8/08 4080	00046126
3.	·	ment number
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	
, ,	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	
	902 South Floriala Ave Snite!	01
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	·
	Lakeland	
	Lakeland, FL 33803	
		-1.0 -4.
(b)		26 26
	Enter name of NEW Registered Agent and/or NEW Registered Office address:	经量工
	3017 Pine Club Drive	WASSELLED WO
	NEW Registered Office Address:	- FAS = 0
		ES 6
		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	Plant City FL 33566	
If the l	limited liability company is not organized under the laws of the State of Florida,	it is hereby confirmed that after
the cha	ange or changes are made, the Florida street address of the registered office and t	he business office of the registered
	will be identical. Or, in the case of a Florida limited liability company, it is herely were authorized by an affirmative vote of the members of the limited liability com	
the art	ticles of organization of the operating agreement of the limited liability company.	
	DAVID	d or typed name of signee
		,,
I here provisi the obi to mer notifie	eby accept the appointment as registered agent and agree to act in this capacity. Sions of all statutes relative to the proper and complete performance of my duties ligations of my position as registered agent as provided for in Chapter 605, F.S. rely reflect a change in the registered office address, I hereby confirm that the lined in writing of this change.	I further agree to comply with the and I am familiar with and accept Or, if this document is being filed nited liability company has been
Signatu	ure of Registered Agent	