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SECRETATION OF THE



CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

CONTACT PERSON: Eyliena Baker -- EXT#

Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE : 029213 COST LIMIT : \$ 25.00 ORDER DATE: September 23, 2021 ORDER TIME : 11:06 AM ORDER NO. : 029213-043 CUSTOMER NO: 4813078 CHANGE OF AGENT NAME: GOLDEN OAK DEVELOPMENT, LLC PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: \_\_\_ CERTIFIED COPY XX PLAIN STAMPED COPY

EXAMINER: \_\_\_\_\_

## 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	ame of the limited liability company: GOLDEN OAK D	PEVELO	PMENT, LL	С
2.	(a)	215 CELEBRATION PLACE	(b) 500 S BUENA VISTA ST		
	` '	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(1)		stailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
		CELEBRATION, FL 34747	_	BURBAN	K, CA 91521
		02/03/2009		L09000011	012
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)	GIACALONE, MARGARET C			
	()	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 1375 BUENA VISTA DRIVE, 4TH FLOOR NORTH			1 SEP
		Registered Office Address (MUST BE FLORIDA STREET A	<u>DUKESS,</u>	<u>!</u>	30
		LAKÉ BUENA VISTA , FL	32830		M 8: 27
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u> Corporation Service Company	Office add	lress:	
		NEW Registered Office Address:		<del></del> .	
		1201 Hays Street			
		Tallahassee	32301		
enai agei was	nge nt w /wei	mited liability company is not organized under the laws or changes are made, the Florida street address of the re fill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of thes of organization or the operating agreement of the li	egistered vility con the limit	l office and npany, it is it ted liability	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
		ira H Gavazzi	Chak	ira H Gavaz	zzi Authorized Person
		ere of a member or authorized representative of a member	-		Printed or typed name of signee
the o	oblig erei	y accept the appointment as registered agent and agree ins of all statutes relative to the proper and complete po gations of my position as registered agent as provided j by reflect a change in the registered office address, I he in writing of this change.	e to act is erforman for in Cl reby con	n this capac ice of my di iapter 605, ifirm that th	city. I further agree to comply with the sties, and I am familiar with and accept F.S. Or, if this document is being filed be limited liability company has been
Sign	<u>X</u>	Lace Cokubl	Gra	ace E. Kirby	y, Asst. Vice President