7/11/2019



Division of Corporations

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

LLC REGISTERED AGENT CHANGE JLCO III, LLC

Certificate of Status	0
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Estimated Charge	\$55.00

Electronic Filing Menu

Corporate Filing Menu

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c.

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

1.	Na	me of the limited liability company: [ILCO III, LLC				<u></u>
2	(a)		(b)			
	()	Principal office address of limited liability company:	,	Aniling andress of limite (Note: MAY BE POS	-	
		(Note: MUST BE STRUET ADDRESS)	No change		1 011100	-
		No change				
		06/24/2010	L100000676	583		
3.		Date of filing/registration in Florida	4.	Document number	<i>(/</i> ;	
c	(-)	Elco Landmark Residential Management LLC			<u>m</u>	2019 JUL 12
5. ((a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State			直流	<u> </u>
		4890 Kennedy Boulevard Suite 240			≥ A	<u> </u>
		Registered Office Address IMUST BE FLORIDA STREET	ADDRESS)	DDRESSI DDRESSI		12 PH
		Tampa , FL	33609	-	E, F	ت ر
,	(b)	C T Corporation System		_	L ATE	ယ ယ
	(17)	Enter name of NEW Resistered Agent and/or NEW Resistered	Office address:			
		1200 South Pine Island Road		-		
		NEW Registered Office Address:				
		Suite 250		_		
		Plantation F(33324	_		
t l	ie ch gent	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited livers authorized by all affirmative vote of the members idles of organization or the operating agreement of the	the registered office in the limited liability company, it of the limited liability eo a limited liability eo	is hereby confirmed ty company or as of	that the cha	nge(s)
			James Miller			
-		attire of a member of authorized representative of a member	and the state of the state	Printed or typed name		lu with the
r t	l her rovi he ol o me	eby accept the appointment as registered agent and ag sions of all sentutes relative to the proper and complete digations of my position as registered agent as provid- rely reflect a change in the registered office address, i	gree to act in this cap e performance of my ed for in Chapter 60 Thereby confirm tha	pacity. I juriner agr duties, and I am far IS, F.S. Or, if this do t the limited liability	miliar with a cument is b company h	and accept being filed as been
7	опл	ed in writing of this change. CT Corporation System	· -	Alfred You	unan	
	y: Signal	nire of Registered Agent	As	sistant Se		ν
		Division of Cornerations P.O.				•

FILING FEE: \$25.00

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