

## Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

(((H24000081182 3)))

**L10000083805**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : ROSSWAY SWAN TIERNEY BARRY LACEY & OLIVER, P.L.  
Account Number : I20050000159  
Phone : (772)231-4440  
Fax Number : (772)231-4430

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

Email Address: FFanizzi67@hotmail.com

RECEIVED

2024 MAR - 1 PM 1:38

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA2024 MAR - 1 PM 3:52  
TALLAHASSEE, FL

FILED

**LLC REGISTERED AGENT CHANGE  
MOUND PRAIRIE RANCH, LLC**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 02      |
| Estimated Charge      | \$25.00 |

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Corporate Filing Menu

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MAR - 4 2024

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Mound Prairie Ranch, LLC

\_\_\_\_\_  
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:

Fred Fanizzi

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

P.O. Box 887

\_\_\_\_\_  
Address

Condon, MT 59826

\_\_\_\_\_  
City/State and Zip Code

ffanizzi67@hotmail.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Fred Fanizzi

at ( 863 ) 634-1763

\_\_\_\_\_  
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:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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. Name of the limited liability company: Mound Prairie Ranch, LLC
2. (a) 11124 NE 224 Street, Okeechobee, FL 34972  
Principal office address of limited liability company:  
(Note: MUST BE STREET ADDRESS)
- (b) 11124 NE 224 Street, Okeechobee, FL 34972  
Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)
3. August 10, 2010  
Date of filing/registration in Florida
4. L10000083805  
Document number
5. (a) Paul R. Amos, Esquire  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
3111 Cardinal Drive  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
Vero Beach, FL 32963
- (b) Paul R. Amos, Esquire  
Enter name of NEW Registered Agent and/or NEW Registered Office address:  
Rossway Swan Tierney Barry & Oliver, P.L.  
NEW Registered Office Address:  
2101 Indian River Blvd., Suite 200  
Vero Beach, FL 32960

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]  
Signature of a member or authorized representative of a member

Fred Fanizzi, Manager

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]  
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314  
FILING FEE: \$25.00

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2024 MAR -1 PM 3:52  
TALLAHASSEE, FL