L16000119221

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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- ☐ **CERTIFIED COPY** _____
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1. Cypress Equestrian LLC
   (CORPORATE NAME AND DOCUMENT #)
2. _____
   (CORPORATE NAME AND DOCUMENT #)
3. _____
   (CORPORATE NAME AND DOCUMENT #)
4. _____
   (CORPORATE NAME AND DOCUMENT #)
5. _____
   (CORPORATE NAME AND DOCUMENT #)
6. _____
   (CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS: _____

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: **Cypress Equestrian LLC**

(a) Principal office address of limited liability company: *(Note: MUST BE STREET ADDRESS)*

14775 Equestrian Way

Wellington, FL 33414

(b) Mailing address of limited liability company: *(Note: MAY BE POST OFFICE BOX)*

14775 Equestrian Way

Wellington, FL 33414

2. 11/16/2010
Date of filing registration in Florida

3. L10000119221
Document number

5. (a) Wedge Associates LLC
Registered Agent and Registered Office shown on the records of the Florida Dept. of State

12180 South Shore Blvd.
Registered Office Address: *(MUST BE FLORIDA STREET ADDRESS)*

Suite 101A

Wellington, FL 33414

Gary Gerson
Name of NEW Registered Agent and/or NEW Registered Office address.

Nason Yeager Gerson White & Lioce, P.A.
3001 PGA Blvd.
NEW Registered Office Address

Suite 305

Palm Beach Gardens, FL 33410

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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.

Maurice C. Perkins, III

Signature of a member or authorized representative of a member

Maurice C. Perkins, III, Manager
Printed or typed name of signer

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 of Registered Agent: Gary Gerson

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