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Special Instructions to	Filing Officer:		
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COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJE	CCT: INDIGO PALMS HOLDI	INGS - DA`	YTONA, LLC
		e of Limited Li	ability Company
Dear Si	r or Madam:		
The end	closed Registered Agent/Registered Offi	ice Change and	fee(s) are submitted for filing.
Please r	return all correspondence concerning thi	is matter to the	following:
Kevin	Jemmott		
	Name of Person		 -
INDIC	GO PALMS HOLDINGS - DAY	YTONA, LL	С
	Firm/Company		_
3989	Chain Bridge Road		
	Address		_
Fairfa	ax, VA 22030		
	City/State and Zip Code		_
kevir	n.jemmott@icloud.com		✓
E	-mail address: (to be used for future ann	ual report notif	ication)
For furt	ther information concerning this matter,	please call:	
Jim Pu	urdum	at (703	359-7200
	Name of Person	<u> </u>	Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Reg Div P.C	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 Ilahassee, Florida 32314
	Enclosed is a check for the following	amount:	
		□ \$5	55 Filing Fee & Certified Copy
INHS18	3 (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.

7 1(57 101		AL NAC		NCS DAVIONA LLC	
1. Na	ime of the limited liability company: INDIGO PA	ALIVI S	HULDI	NGS - DAYTONA, LLC	
2. (a)	INDIGO PALMS HOLDINGS - DAYTONA, LL	C (b)	INDIGO I	PALMS HOLDINGS - DAYTONA, L	LC_
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	3989 CHAIN BRIÐGE ROAD		3989 CI	HAIN BRIDGE ROAD	
	FAIRFAX, VA 22030	_	FAIRFA	X, VA 22030	
	11/29/2010		_10000°	122386	
3.	Date of filing/registration in Florida	 4.		Document number	
5 (X					
5. (a)	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of State	- te:	
	ROSS, BRIAN M ESQ.				
	Registered Office Address (MUST BE FLORIDA STREET)	(MUST BE FLORIDA STREET ADDRESS)		-	
	5010 W. CARMEN STREET, SUITE 2602			201 SE	
	TAMPA , FL	33609		2019 HAY SECRET	
(b)	Registered Agents Inc.			38 J F	
(-,	Enter name of NEW Registered Agent and/or NEW Registered	Office add	ress:	PHIS:	
	7901 4th St N			21 :21 STATE	
	NEW Registered Office Address:				
	STE 300			_	
	St. PetersburgFL	33702		_	
the chargent was/we the artificial Signal	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the ture of a member or authorized representative of a member by accept the appointment as registered agent and agricultures of all statutes relative to the proper and complete ligations of my position as registered agent as provide	the regis ability co of the lim limited E	tered officempany, it is ted liability con ability con ert P. Hos	te and the business office of the registe is hereby confirmed that the change(s) ty company or as otherwise provided impany. Stler, President Printed or typed name of signce pacity. I further agree to comply with	ered n the

Signature of Registered Agent

Bill Havre

- Assistant Secretary