[1] 2020 5(224)			
(Requestor's Name) (Address) (Address)	300432938903		
(City/State/Zip/Phone #)	07/15/2401623601 ++25.00		
(Document Number)			
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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.

• •	Principal office address of limited liability company:	(b)	Mailing address of limited liability company	
	Principal office address of limited hability company: (<u>Note: MUST BE STREET ADDRESS</u>)		(<i>Note: MAY BE POST OFFICE BOX</i>)	
	14611 Ben C. Pratt Six Mile Cypress Pkwy		<u></u>	
	Fort Myers, FL 33912			
	05/11/2011	L110	000056224	
	Date of filing/registration in Florida	4.	Document number	
(a)				
`	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:			
	George H. Knott, Esq.			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		202	
	1625 Hendry Street, 3rd Floor		2021,	
	Fort Myers, FL, FL			
		, FL		
(b)			ت- 	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :		 ;; 0	
	Danada Kaina		10	
	Randy Keim			
	NEW Registered Office Address:			
	14611 Ben C. Pratt Six Mile Cypress Pkwy			
	Fort Myers			

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.

-Low Signature of a member or authorized representative of a member

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Printed or typed name of signce

Randy Keim, Manager

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.

la

Signature of Registered Agent

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