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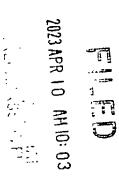
(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
, , , , , , , , , , , , , , , , , , , ,							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
							
Special Instructions to Filing Officer:							

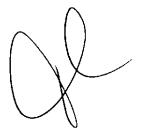
Office Use Only



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COVER LETTER

3PSCD - PUBLIC PRIVATE PARTNERSHI SUBJECT:	P FOR SUSTAINABLE COMMUNITY DEVELOPMENT LLC
	mited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Cha	nge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	r to the following:
Michael Serrano	
Name of Person	
ZenBusiness Inc.	
Firm/Company	
336 E. College Ave. Suite 301	
Address	
Tallahassee, FL 32301	
City/State and Zip Code	
ra@zenbusiness.com	
E-mail address: (to be used for future annual repo	ort notification)
For further information concerning this matter, please	call:
Michael Serrano	344 493-6249
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

☐ \$55 Filing Fee & Certified Copy

2023 APR 10 AH 10: 03

INHS18 (2/14)

■ \$25 Filing Fee

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.	Na	me of the limited liability company:	ATE F	ARTNERSH	IIP POR SUSTAINABLE	COMMUNITY DEVELOPMENT LL		
2. ((a)	006 South Meridian Street (b) 1606			South Meridian Stre	South Meridian Street		
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(0)	Mailing address of	of limited liability company: BE POST OFFICE BOX)		
		Tallahassee, FL 32301	-	Talla	hassee, FL 32301			
		07-21-2011	_	L1100	0083846			
3.		Date of filing/registration in Florida	4		Document nu	ımber		
5.	(a)	Zen Business INC						
٦.	(a)	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)						
(b)		336 E. College Ave. Suite 301						
		Registered Office Address (ST BE FLORIDA STREET ADDRESS)						
		Tallahassee, FL_	32	301		[E] 2023 APR		
	(b)	ZenBusiness Inc				APR 10 AH		
	(-)	Enter name of NEW Registered Agent and/or NEW Registered Office address:						
		336 E. College Ave. Suite 301				AH 10: 03		
		NEW Registered Office Address:						
		Tallahassee , FL		2301				
cha age was	nge nt v s/we	imited liability company is not organized under the laws or changes are made, the Florida street address of the revill be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	egis oility the	ered office company limited list	ce and the business y, it is hereby confi- ability company or	office of the registered rmed that the change(s)		
	ie	/s/ Richard D Gragg PHD			Richard D	Gragg PHD		
	-	ture of a member or authorized representative of a member	_		,,	d name of signee		
I he pro the to n not	eret visi obli nere ified	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided liv reflect a change in the registered office address. I he lin	e to erfor for i	act in this rmance of n Chapte r confirm	s capacity. I furthen f my duties, and I a r 605, F.S. Or, if th that the limited lian	r agree to comply with the m familiar with and accept his document is being filed bility company has been		
Sig	natu	re of Registered Agent						