

h11000142490

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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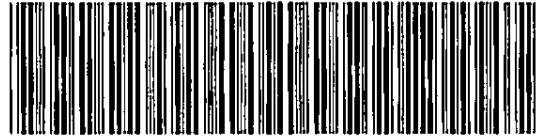
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: HENSCHTAL PROPERTIES 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:

DARIN BROWN

Name of Person

HENSCHTAL PROPERTIES LLC

Firm/Company

620 PALENCIA CLUB DR UNIT 205

Address

SAINT AUGUSTINE, FL 32095

City/State and Zip Code

HENSCHTAL PROPERTIES @ GMAIL.COM

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

For further information concerning this matter, please call:

DARIN BROWN

Name of Person

at ( 352 ) 208-3428

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

ADDRESS

**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: HENSCHAL PROPERTIES LLC
2. (a) 620 PALENCIA CLUB DR UNIT 205 (b) 620 PALENCIA CLUB DR UNIT 205  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)  
SAINT AUGUSTINE, FL 32095 SAINT AUGUSTINE, FL 32095
3. 12/15/2011 Date of filing/registration in Florida 4. L 11000142490 Document number
5. (a) DARIN BROWN  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
631 RUGBY STREET  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
ORLANDO, FL 32804
- (b) DARIN BROWN  
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:  
620 PALENCIA CLUB DR UNIT 205  
**NEW Registered Office Address**:  
SAINT AUGUSTINE, FL 32095

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

DARIN BROWN  
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