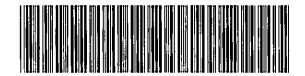
## L12 0000 46327 -

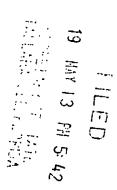
(F	Requestor's Name)			
(Address)				
(Address)				
(0	City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				
		ĺ		

Office Use Only



900329413549

U5/13/19--U1016--U12 \*\*25.00



O SIMMONS

## COVER LETTER

Division of Corporations	
Briggs Land LLC	
	imited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Cha	ange and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	er to the following:
Richard Ukmar	
Name of Person	
Briggs Land LLC	
Firm/Company	
5783 Center Ring Rd	
Address	
Sarasota, FL 34243	
City/State and Zip Code	<del></del>
rjukmar@aol.com	
E-mail address: (to be used for future annual rep	port notification)
For further information concerning this matter, please	call:
Richard Ukmar	941 650-4094
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amou	nt:
<b>☑</b> \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy

## 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.

I. Na	me of the limited liability company: Briggs Land I	_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)
	5783 center ring rd	578	783 Center ring rd
	Sarasota, FL 34243	Sa	arasota, FL 34243
	5/11/2018	L12	2000046327
3.	5 に えいら Date of filing/registration in Florida	4.	Document number
5. (a)			
). (a)	Registered Agent and Registered Office shown on the records of	the Florida Dept	ot, of State:
	Jefferson F Riddell		
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	
	3400 South Tamiami Trail		
	Sarasota , FI.	34243	
	, FI.	·	
(b)			• •
(0)	Enter name of NEW Registered Agent and/or NEW Registered		$\mathbf{s}$
	D: 1		y ++
	Richard Ukmar		
	NEW Registered Office Address:		42
	5783 Center ring rd		
	Sarasota	34243	
			<del></del>
he cha	imited liability company is not organized under the law inge or changes are made, the Florida street address of	the registered	ed office and the business office of the registere
	vill be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members of		
	eles of organization or the operating agreement of the		
_//	Cit Man	Richard	d Ukmar
Signat	ture of a member or authorized representative of a member		Printed or typed name of signee
provisi he obl o mere	by accept the appointment as registered agent and age ons of all statutes relative to the proper and complete igations of my position as registered agent as provide Ity felfect a change in the registered office address. I I'm writing of this ghange.	performance d för in Chap	e of my duties, and I am familiar with and accep- pter 605, F.S. Or, if this document is being filed
Sinnar	Will the		
ाष्ट्राध्यक्ष	re of Registered Agent		