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(Requestor's Name) (Address) (Address)	500355242845	
(City/State/Zip/Phone #)	12/14/2001019009 <b>**</b> 25.00	
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	212 DEC 11 PH 6: 21	
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## COVER LETTER

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**Registration Section** TO: Division of Corporations\*

Selective Realty Group LLC SUBJECT:

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:

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Craig D Luiz

Name of Person

Selective Realty Group LLC

Firm/Company

12001 Research Parkway Suite 236

Address

Orlando, Fl 32826

City/State and Zip Code

CraigL@SelectiveRealtygroup.com

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

For further information concerning this matter, please call:

Shanon Luiz	407- at (	706-1080
Name of Person		Area Code & Daytime Telephone Number
Mailing Address:		Street Address:
Registration Section		Registration Section
Division of Corporations		Division of Corporations
P.O. Box 6327		The Centre of Tallahassee
Tallahassee, FL 32314		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

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

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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. N	ame of the limited liability company:	Group LLC	C
2. (a)	12001 Research Parkway Suite 236	(b	12001 Research Parkway Suite 236
- ()	Principal office address of limited liability company: ( <u>Note: MUST BE STREET ADDRESS</u> )	(1	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Orlando, Fl 32826		Orlando, Fl 32826
	6/20/2020		L12000082344
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Craig D Luiz		
5. (u)	Registered Agent and Registered Office shown on the records of Selective Realty Group LLC	the Florida	
	Registered Office Address (MUST BE FLORIDA STREET 12001 Research Parkway Suite 236	ADDRESS	SI DEC
	Orlando	32826	
(b)	Craig D Luiz	<b>.</b>	PH 6.
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registerer</u>	<u>d Office add</u>	Idress: 2
	same address		
	<u>NEW</u> Registered Office Address:		
	, FI	1.	
change agent v was/we	imited liability company is not organized under the lar or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	ws of the registere ability con of the limit	ed office and the business office of the registered ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in liability company.
Silona	ture of a member or puthorized representative of a member	<del></del>	Printed or typed name of signee
I here provisi the obt to mer	by accept the appointment as registered agent and agr ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d'in writing of this change.	ree to act performa d for in C hereby co	t in this capacity. I further agree to comply with the

Sighature of Registered Agent

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