## 13000046998

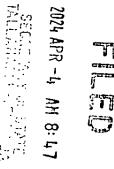
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
1
Umils

Office Use Only



100426800081

04/04/24--01028--002 \*\*1575.00



## 

AF T

TO: Registration Section Division of Corporations	
Dandeland Earth Properties, LLC SUBJECT:	
	me of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Off	fice Change and fee(s) are submitted for filing.
Please return all correspondence concerning th	nis matter to the following:
Kylie Conrad & Kayla King	
Name of Person	<del></del>
Corp1, Inc.	
Firm/Company	
7700 E Arapahoe Rd Ste 220	
Address	<del> </del>
Centennial, CO 80112	
City/State and Zip Code	
E-mail address: (to be used for future and	nual report notification)
For further information concerning this matter	, please call:
Kylie Conrad	720 823-9273 at ( )
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
Enclosed is a check for the following	g amount:
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
INHS18 (2/14)	

## 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.

L N	ame of the limited liability company:	h Prope	rties.	LLC	
2. (a)	ISOLN MUTTARY TRAIL		(h	C/O 1801	N. MILITARY TRAIL
2. (u)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		(,,		Mailing address of limited liability company;  (Note: MAY BE POST OFFICE BOX)
	SUITE 200			SUITE 20	0
	BOCA RATON, FL 33431			BOCA RA	NTON, FL 33431
	03/29/2013		1	L13000046	998
3.	Date of filing/registration in Florida	4.	-		Document number
5. (a)	CSC				
, ,	Registered Agent and Registered Office shown on the records of 1201 HAYS STREET				e:
	Registered Office Address (MUST BE FLORIDA STREE	T ADDR	(ESS)	!	2024 APR SECASA
	TALLAHASSEE, I	FL_3230	)1-25	25	
(b)	Registered Agents Inc			_	
, ,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :				- c &
	7901 4th St N				# 8: L1
	NEW Registered Office Address:				
	Ste 300				_
	St. Petersburg, I	°L	)2		_
change agent was/w	limited liability company is not organized under the I to or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited tere authorized by an affirmative vote of the members cicles of organization or the operating agreement of the control of	ne regis liability s of the he limi	tered limited I	d office an npany, it i ted liabilit iability co	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in mpany.
	manuel Lesly Brezault	_	Emm	ianuel Lesly	
1 here provis the ob- to mer	uure of a member or authorized representative of a member  why accept the appointment as registered agent and a ions of all statutes relative to the proper and complet ligations of my position as registered agent as provid why reflect a change in the registered office address, what is writing of this change.	gree to le perfo led for I hereb	act i rma in C. y co.	in this cap nce of my hapter 60; nfirm that	Printed or typed name of signee acity. I further agree to comply with the duties, and I am familiar with and accept 5. F.S. Or, if this document is being filed the limited liability company has been
	AVID ROBERTS				
Signati	are of Registered Agent				