8/27/2021

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000321478 3)))



H210003214783ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 : (954)208-0845 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:____

LLC REGISTERED AGENT CHANGE **KNIGHT 39 HOLDINGS, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

AUG 3 0 2021

A. LUNT

Electronic Filing Menu Corporate Filing Menu

Help

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: Knight 39 Holding	s, LLC	- 			
2. (a)		Z 1)			
()	Principal office address of limited hability company: (Note: MUNT BE STREET ADDRESS)	-	Ŋ	tailing address of limited liabi (Note: MAY BE POST OF)	lity comp	any:
	9223 Tibet Pointe Circle		9223 Tibet	Pointe Circle		
	Windermere, FL 34786	_	Windermer	re, FL 34786		
	04/25/2013		L130000604	413		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)	DAVIS, WILLIAM Jack, II					
. (u)	Registered Agent and Registered Office shown on the records of a	he Florida	Dept. of State	::		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		-	2021	ISIAIr	
	9223 Tibet Pointe Circle			_	2021 AUG	SION
	Windermere FL	34786		•	627	FIL TARY OF CO
	C.T. Corporation System				A	389 10 10
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office ad	dress:	-	AM 10: 17	TILEO ARY OF STATE CORPGRATION:
	NEW Registered Office Address:			-		
	1200 South Pine Island Road			-		
	Plantation FL	33324	<u></u>	_		
the chagent was/w the art	limited liability company is not organized under the lay ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lic ere authorized by an affirmative vote of the members o icles of organization or the operating agreement of the	vs of the the regi ability co of the lin limited	State of Fice stered office ompany, it is nited liability liability con	e and the business office s hereby confirmed that t y company or as otherwi- npany.	or the r he char	egistereu ige(s)
	The Wint II	W11	liam Jack Da	vis it Printed or typed name of sign	nec	
I here provis the ob- to mer notific By:	thy accept the appointment as registered agent and agricions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address. It is discussed in writing of this change. CT Corporation System Jame Showed.	ee to ac perform d for in hereby o	t in this cap nance of my Chapter 603 anfirm that	zwity. I further zames to	camph	with the ad accept ing filed s been
Signal	ure of Registered Agent Leas France America Science		- 41° 11° 1	22714		

Division of Corporations P.O. Box 6327 • Tallahassee, FL 32314