Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107

Fax Number : (561)694-1639

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2020 JUL -9

LLC REGISTERED AGENT CHANGE GERACI LAND ACQUISITION, LLC

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JUL 1 U 2020

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. 1	Name of the limited liability company: GERACI LAND	ACQU	ISI	rion, llc				
2. (a	405 NORTH DEC STREET SLOTTE 330		(b)	405 NOR	TH REO STREET, S	SUTTE 33	0	
(-	Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS)	_	(0)		Mailing address of limit (Note: MAY BE PO			-
	TAMPA, FL 33609	_		TAMPA,	FL 33609	,		
	09/27/2013		Ľ	_130001372	235			
3. 5. (B	Date of filing/registration in Florida CT CORPORATION SYSTEM	4.	-	~····	Document number	_		
	Registered Agent and Registered Office shown on the records of 1200 SOUTH PINE ISLAND ROAD	the Flor	ida l	Dept. of State	- ¢:			
	Registered Office Address (MUST BE FLORIDA STREET)	<u>IDDRE</u>	<u>:SS)</u>		-			
	PLANTATION, FL	33324			-			
(b)	Corporate Creations Network Inc.			····	_	_		
	Enter name of NEW Registered Agent and/or NEW Registered 801 US Highway 1	Office :	<u>thh</u>	<u>'ess</u> :			יין ווי	•
	NEW Registered Office Address:					٠.	<u>1</u> -9	•
							PH	
	North Palm Beach , FL	33408					 	
change agent was/w	imited liability company is not organized under the law or changes are made, the Florida street address of the swill be identical. Or, in the case of a Plorida limited lial ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the l	egiste oility of the li- imited	red com mite lial	office and pany, it is ed liability bility comp	the business office hereby confirmed to company or as other	of the re	egistere :hange(s	d s)
Signa	ture of a member or pathorized representative of a member		41164		Printed or typed name of	of signee		
I here Provisi he obi o mer	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I ha d in writing of this change. Danielle Gossman, Special	erforn for in ereby c	conf	this capac	city. I further gores	e to com	ply with 1 and ac 2 being f has bee	the cept filed m
Signatu	re of Registard Agent		•					