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Division of Corporations



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Corporate Filing Menu Electronic Filing Menu

Estimated Charge

Help

\$25.00

APPROVED

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY 4

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

(a)	2154 Tallsman Ct	((b) 2518 Bur	msed Blvd, Ste 335			
• •	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limit (Note: MAY BE PO)	-		:
	The Villages, Fl. 32163		The Villa	ges, FL 32163			
	02/18/2014	<u> </u>	L14000028	3337			
	Date of filing/registration in Florida	4		Document number	•		
(a)	Kimbel, Tara L.						
		C.1. C1 1					
	Registered Agent and Registered Office shown on the records of Registered Office Address (MUST BE FLORIDA STREE)		da Dept, of Sta				
			da Dept, of Sta				
	Registered Office Address <u>(MUST BE FLORIDA STREE</u>) 2518 Burnsed Blvd, Ste 335 The Villages	ADDRES	d a Dept, of Sta <u>SSI</u>			2022	
(b)	Registered Office Address (<u>MUST BE FLORIDA STREE</u>) 2518 Burnsed Blvd, Ste 335 The Villages, F C T Corporation System	L. 32163	da Dept. of Sis <u>SSI</u>	 		2022 APR	<u> </u>
(b)	Registered Office Address (<u>MUST BE FLORIDA STREE</u>) 2518 Burnsed Blvd, Ste 335 The Villages, F C T Corporation System	L. 32163	da Dept. of Sis <u>SSI</u>			2022 APR - 8 PM	FILED
(b)	Registered Office Address (<u>MUST BE FLORIDA STREE</u>) 2518 Burnsed Blvd, Ste 335 The Villages, F C T Corporation System	L. 32163	da Dept. of Sis <u>SSI</u>	te- 		8	FILED
(b)	Registered Office Address (MUST BE FLORIDA STREE) 2518 Burnsed Blvd. Ste 335 The Villages, F C T Corporation System Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	L. 32163	da Dept. of Sis <u>SSI</u>			8 PH	FILED

the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

of a member or authorized representative of a member Lothery Wilfe Printed or typed name of signee Thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change. R = Afi

nie Bell Bv: C T Corporation System by:

Signature of Registered Agent

Division of Corporations+ P.O. Box 6327+ Tailahassee, FL 32314 **FILING FEE: \$25.00**