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To:

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)214-8442

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

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## LLC REGISTERED AGENT CHANGE SPARTON DELEON SPRINGS, LLC

Certificate of Status	0
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Page Count	02
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## 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,

. Na	me of the limited liability company: SPAF	RTON D	ELEO	N SPRING	GS. LLC			
. (a)	5612 Johnson Lake Road		(b)	5612	Johnson La	ke Road		
	Principal office address of limited liability comp (Nate: MUST BE STREET ADDRESS)	pany;		N	dailing address o ( <u>Note: MAY B</u>		-	
	Delcon Springs, FL 32130			Delcon	Springs, F	L 32130		
	03/28/2014		_	L140000	052061			
	Date of filing/registration in Florida		4.	,	Document nu	mber		
. (a)	C T CORPORATION SYSTEM							
	Registered Agent and Registered Office shown on the re-	cords of the	Florida	Dept, of State				
	1200 SOUTH PINE ISLAND ROAD							
	Registered Office Address (MUST BE FLORIDA S	TREET AL	DRESS)					
						10 gray	20	
	PLANTATION	, FL	33324	4			2023 H 1 Y	
(b)	Corporate Creations Network Inc.						1	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Re</u>	eristered ()	filce add	<u>reas</u>		•		r,
	801 US Highway 1					ر ج. : 	5: 44	
	NEW Registered Office Address:					-	*	
	North Paim Beach	, FL	33408	}				

101	T Alti	וחו	Lazarus
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Caitlin Lazarus, Attorney-in-Fact

Signature of a member or authorized representative of a member

Printed or typed name of signee

I hereby 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.

/s/ Caitlin Lazarus

Caitlin Lazarus, Special Secretary

Signature of Registered Agent