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From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)694-1639

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LLC REGISTERED AGENT CHANGE HAVEN HOLDINGS OF CENTRAL FLORIDA, LLC

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JUN 2 1 2019

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. N	ame of the limited liability company: HAVEN HOL	DINGS OF CEN	TRAL FLORIDA,	LLC		
. ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)				
	850 SEMINOLE WOODS BLVD.	850 SE	850 SEMINOLE WOODS BLVD. GENEVA, FL 32732			
	GENEVA, FL 32732	GENEV				
	02/01/1999	L140000	63842			
3.	Date of filing/registration in Florida	4.	Document number			
5 (a)				* **	2	
J. (L)	Registered Agent and Registered Office shown on the recurds of	the Florida Dept. of Sta	te:	F:	919	
	ROSS-ANDINO, KEVIN K	·			2019 JUN 20	
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	_	1.5	E	1
	2180 WEST STATE ROAD 434 SUITE 210	0		-, - ,	0	= }
	LONGWOOD , FL	32779	-		PH	B'⊂
			-	 .:-	$\dot{\omega}$	
(b)	Enter name of NEW Registered Agent and/or NEW Registered			•	-0	
. ,	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	-			
	ROSS-ANDINO, KEVIN K					
	NEW Registered Office Address:		_			
	307 Cranes Roost Blvd Suite #2010		_			
	Altamonte Springs , FL	32701				
If the l	imited liability company is not organized under the lay	ws of the State of F	– orida, it is hereby co	กโirmed เ	that ail	cr
the cha agent was/w	ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lighter authorized by an affirmative vote of the members of icles of organization on the operating agreement of the	the registered office bility company, it is the limited liability.	e and the business of is hereby confirmed to ty company or as other	ffice of the	se regis hange(stered
		Ryan Sulliva	л, Attorney-In-Fa	ct		
-	ture of a member or authorized representative of a member		Printed or typed name of	**		
I here provis the ob- to mer notifie	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, I do not the change.	ee to act in this cap performance of my d for in Chapter 60, hereby confirm that	vacity. I further agredultes, and I am fam 5, F.S. Or, if this doc the limited liability o	e to com iliar with cument is company	ply wit and a being has be	h the eccept filed en
Signato	Ryan Sullivan, S	oheciai Sectel	ary			