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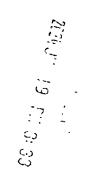
(Requestor's Name)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
J. HORNE JUL 29 2024					





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COVER LETTER

TO:

INHS18 (2/14)

Registration Section

Division of Corporations 2672 WEST RIDGE ROAD LLC SUBJECT: Name of Limited Liability Company Dear Sir or Madam: The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: William R. Heitz, Esq. Name of Person HEITZ LAW FIRM PLLC Firm/Company 2875 South Ocean Drive, Suite 200-19 Address Palm Beach, Florida 33480 City/State and Zip Code wheitz@heitzlaw.us E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 272-7760 Nathan Vander Wal, Esq. Area Code & Daytime Telephone Number Name of Person Mailing Address: **Street Address:** Registration Section Registration Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314 Tallahassee, FL 32303 Enclosed is a check for the following amount: ☐ \$55 Filing Fee & Certified Copy ■ \$25 Filing Fee

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. Na	time of the limited liability company: 2672 WEST RID	GE RC	AD LLO	.C	
2. (a)	1950 BRIGHTON HEN TLR		1950 BRIGHTON HEN TLR		
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	ROCHESTER, NY 14623		RO	OCHESTER, NY 14623	
	05/02/2014		1.140	000071578	
. (a)	Date of filing/registration in Florida CORPORATION SERVICE COMPANY	4.		Document number	
(b)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 1201 HAYS STREET			t. of State:	
	Registered Office Address (MUST BE FLORIDA STREET.	ADDRI	ESS)		
	TALLAHASSEE, FI	3230	1		
	JOHN L. DIMARCO, SR.			(
	Enter name of NEW Registered Agent and/or NEW Registered Office address:			; ;	
	4938 SANCTUARY LANE			-1	
	NEW Registered Office Address:			 (၁ (၁	
	BOCA RATON FL	3343			
hange gent w /as/we ne arti	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	regist ability of the I limite	ered offi compan imited li d liabilit	fice and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in ity company.	
Signat	ure of a member or authorited representative of a member	_	-011	Printed or typed name of signee	
herel rovisi he obli mere	by accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I l in writing of this change.	ee to c perfor d for ii hereby	ict in thi mance o i Chapto confirm	nis capacity. I further agree to comply with the of my duties, and I am familiar with and accepter 605, F.S. Or, if this document is being fils in that the limited liability company has been	
Signatur	re of Registered Agent				