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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.

Account Number : 072720000036 : (407)843-4600 Phone : (786)901-8020 Fax Number

Attn: Tami D. Passley

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

Em - 1 1	Address:			

LLC REGISTERED AGENT CHANGE VL PARCELS, LLC

Certificate of Status	0
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Corporate Filing Menu

Help

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.

• •		(t)			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of	limited liability compan POST OFFICE BOX	y:
	3300 Publix Corporate Pkwy		3300 Pu	ıblix Corporate Pkw	/y	
	Lakeland, Florida 33811		Lakelan	nd, Florida 33811		, de
	8/19/2014		L14000	130036		
	Date of filing/registration in Florida	4.		Document num	nber	
(a)						
(a)	Registered Agent and Registered Office shown on the records o	f the Florida	Dept. of S	State:		
	Stephen E. Brandon					
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	7			
	200 Pasadena Place				-: 20	
	Orlando	32803			2022 APR	
	Orlando , F	L			AP R	
						\equiv
(b)	Enter name of NEW Registered Agent and/or NEW Registere	d Office ac	ldress:			<u>_</u>
			 -		P	
	Corporate Creations Network, Inc.				<u> </u>	
	NEW Registered Office Address:				်းမေ	
	801 US Highway I					
	North Palm Beach , F	L_33408_				

COVER LETTER

TO: Registration Section Division of Corporations		
Red Beacon Strategies, LLC SUBJECT:		
Nar	ne of Limited Liab	pility Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Of	fice Change and fe	e(s) are submitted for filing.
Please return all correspondence concerning th	nis matter to the fol	llowing:
Louis Tavares		
Name of Person		-
Red Beacon Strategies, LLC		
Firm/Company		
9100 Conway Windermere Rd., Suite 200		
Address		-
Windermere, FL 34786		
City/State and Zip Code		_
lou@redbeaconstrategies.com		
E-mail address: (to be used for future ar	inual report notific	ation)
For further information concerning this matte	r, please call:	
Louis Tavares	617 at (921-2931
Name of Person		Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following	ıg amount:	
■ \$25 Filing Fee	□ \$5	5 Filing Fee & Certified Copy
INHS18 (2/14)		

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.

		(b)		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		M	failing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	9100 Conroy Windermere Rd., Suite 200		9100 Conroy Windermere Rd., Suite 200		
	Windermere, FL 34786		Windermere	e, FL 34786	
	3/1/2022		L2200010579	99	
	Date of filing/registration in Florida	4.		Document number	
. (a)					
. (u)	Registered Agent and Registered Office shown on the records of Collin W. L. McLeod, Esq.	f the Florida	Dept. of State	:	
	Registered Office Address (MUST BE FLORIDA STREET) 24 S. Orange Ave.	TADDRES	5)	·	
	Orlando , F	32801			
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u> Collin W. L. McLeod, Esq.	VI VIIIV	<u></u>		
	NEW Registered Office Address:	·		-	
	636 W. Yale Street			-	
	Orlando, 1	FL		_	
chang agent was/w	Orlando limited liability company is not organized under the le or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member ticles of organization or the operating agreement of the	FL	red office an ompany, it is nited liabilit	s hereby confirmed that the change(s) y company or as otherwise provided in	
chang agent was/w the art	limited liability company is not organized under the le or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member	laws of the he register liability c s of the lin he limited	ompany, it is nited liabilit liability con uis Tavares	s hereby confirmed that the change(s) y company or as otherwise provided in npany. Printed or typed name of signee	