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LLC REGISTERED AGENT CHANGE ANDERSON'S ACRES LLC

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K. SALY MAY 1 6 2019

Electronic Filing Menu

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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.

| 1. Na | ame of the limited liability company: ANDERSON'S | ACRE | SLLC | |
|------------------------------|--|---|---|---|
| 2. (a) | | (b) | | |
| | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | _ (*) | N | Aailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) |
| • | 5860 BOGGS FORD RD | | | |
| | PORT ORANGE, FL 32127 | - | | |
| | 09/25/2014 | l | .1400015 | 50536 |
| 3. | Date of filing/registration in Florida | 4. | | Document number |
| 5. (a) | LEGALINC CORPORATE SERVICES INC. | | | |
| J. (L) | Registered Agent and Registered Office shown on the records of t | he Florida l | Dept. of State | :: |
| | 5237 SUMMERLIN COMMONS BLVD STE | 400 | | |
| | Registered Office Address MUST BE FLORIDA STREET A | DDRESS) | | |
| | | | | 三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三 |
| | FORT MYERS | 33907 | | 9 天 5 |
| | , FL | | | |
| (b) | ROCKET LAWYER CORPORATE SERVICE | ES LLC | | 是一里 |
| • • | Buter name of NEW Registered Agent and/or NEW Registered | Office add | ess: | 9. |
| | 155 OFFICE PLAZA DRIVE, 1ST FLOOR | | | 08B |
| | NEW Registered Office Address: | | | . F |
| | Tar regional of the Andress. | | | |
| | | | | |
| | TALLAHASSEE .FL | 32301 | | |
| the cha agent v was/wa | imited liability company is not organized under the lawinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liagree authorized by an affirmative vote of the members of cless of organization or the operating agreement of the land. | the regist bility cor f the limit limited li | ered office npany, it is ted liability ability com | and the business office of the registered hereby confirmed that the change(s) y company or as otherwise provided in |
| Signa | tup of a member or authorized representative of a member | | - OA GOITC | Printed or typed name of signee |
| the oblito mere notified | by accept the appointment as registered agent and agree ons of all statules relative to the proper and complete parties of my provided agent as provided by reflect a change in the registered office address, I have the provided agent as provided by reflect a change in the registered office address, I have the provided agent as a conference of the provided Agent | ee to act i performa I for in Ci ereby coi | n this capa nce of my a napter 605, nfirm that t | acity. I further agree to comply with the |

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