

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000098144 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Tc:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : FISHER, TOUSEY, LEAS & BALL

Account Number : I19990000021 Phone : (904)356-2600

Fax Number : (904)355-0233

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

LLC REGISTERED AGENT CHANGE 4358 TIMUQUANA ROAD UNIT 183, LLC

Certificate of Status	0
Certified Copy	U
Page Count	01
Estimated Charge	\$25.00

APR 0 2 2020

Electronic Filing Menu Corporate Filing Menu

Help



STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

II20000098144

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statules, the undersozned limited diability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

l. N	une of the limited liability company; 4358 Timuqua	na Road Unit 183, I	.LC
2. (a)	501 Riverside Avenue, Suite 600	(b) <u>501 1</u>	Riverside Avenue, Suite 600
2. (11)	Principal office address of limited liability company: (Note: MUST RE STREET ADDRESS)	107	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Jacksonville, Florida 32202	Jacks	onville, Florida 32202
	September 15, 2015	1.1500	0156929
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Fisher, Tousey, Leas & Ball, P.A.		
J. (B)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State		2020 APR
	501 Riverside Avenue, Suite 600		
	Registered Office Address (MUST BE FLORIDA STREE	ET ADDRESS)	
	Jacksonville	FL	
(b)	Linda Lanier		
` ,	Enter name of NEW Registered Agent and/or NEW Registe	red Office address:	
	1618 Atlantic Beach Drive		
	NEW Registered Office Address:		 -
	Atlantic Beach	FL_32233	
change agent was/w	limited liability company is not organized under the or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the membericles of organization or the operating agreement of the street of the s	laws of the State of the registered offic I liability company rs of the limited lis the limited liability	re and the business office of the registered to the change(s) to the change(s) ability company or as otherwise provided in company.
	Jenda Janen	Linda Lanie	er, as Authorized Representative
I here provisi the obi to mer	which of a metaber of authorized representative of a member by accept the appointment as registered agent and a line of all statutes relative to the proper and completing tions of my position as registered agent as proviety reflect a change in the registered office address, din writing of this change.	agree to act in this ele performance of ded for in Chapter I hereby confirm	Printed or typed name of signee capacity. I further agree to comply with the fmy duties, and I am familiar with and accept of 605, F.S. Or, if this document is being filed that the limited liability company has been
Signati	in of Registred Agent		H20000098144