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Florida Department of State
Division of Corporations
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To:
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Fax Number : (850)617-6383

From:
Account Name : FORSTERBOUGHMAN
Account Number : I20140000076
Phone : (407)255-2055
Fax Number : (407)264-8295

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

Email Address: jon@ricottacheeses.com

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LLC REGISTERED AGENT CHANGE
PRESTIGIOUS LBM 2, LLC

Certificate of Status	0
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SEP 28 2023

K. Brumbley

H23000341893

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Prestigious UBM 2, LLC
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:

Gary A. Forster, Esq.
Name of Person

ForsterBoughman
Firm/Company

2200 Lucien Way, Suite 405
Address

Maitland, FL 32751
City/State and Zip Code

jon@ricottacheeses.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gary A. Forster, Esq. at (407) 255-2055
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 amount:

■ $25 Filing Fee ☐ $55 Filing Fee & Certified Copy

H23000341893

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. Name of the limited liability company: Prestigious LBM 2, LLC

2. (a) 4241 LB McLeod Road , Suite D
Orlando, FL 32811
Principal office address of limited liability company: (*Note: MUST BE STREET ADDRESS*)

(b) 4241 LB McLeod Road , Suite D
Orlando, FL 32811
Mailing address of limited liability company: (*Note: MAY BE POST OFFICE BOX*)

3. 10/02/2015
Date of filing/registration in Florida

4. L15000167630
Document number

5. (a) Anderson Registered Agents, Inc.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State
625 E. Twiggs Street
Registered Office Address (*MUST BE FLORIDA STREET ADDRESS*)
Suite 110
Tampa , FL 33602

(b) ForsterBoughman
Enter name of NEW Registered Agent and/or NEW Registered Office address:
2200 Lucien Way
NEW Registered Office Address
Suite 405
Maitland , FL 32751

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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Jon Villecco
Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314
FILING FEE: $25.00

INHS15 (2/14)