Division of Corporations

Florida Department of State Division of Corporations Electronic Filting Cover Sheet

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	Account Number : FCA000000023	四国
	Phone : (614)280-3338	
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annual report mailings. Enter only one email address please.**

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LLC REGISTERED AGENT CHANGE TWO STREET, LLC

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

Help

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JAN 23 2020

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.

. Na	me of the limited liability company: Two Street, LLC		
?. (a)	340 Corporate Way Suite 300 Orange Park, FL 32073	(b)	orate Way Suite 300 Orange Park, FL 32073
(11)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	03/15/2016	1.16000053	
3.	Date of filing/registration in Florida	4.	Document number
i. (a)	Hill, Alexandria V		
i. (4)	Registered Agent and Registered Office shown on the records of	the Florida Dept. of Sta	2020 JAN 22 PH 2: 53 SECRETARIASSEE, FL
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	
	340 Corporate Way Suite 300		E 2
	Orange Park Fl	32073	PH 2: 53
(b)	C.T Corporation System		: 53
(0)	Enter name of NEW Registered Agent and/or NEW Registered	d Office address:	1.7
	NEW Registered Office Address:		
	1200 South Pine Island Road		·
	Plantation , FE	33324	 -
he cha agent was/w he art	imited liability company is not organized under the lange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited lier authorized by an affirmative vote of the members of organization or the operating agreement of the large of a member of authorized representative of a member by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I	iability company, it of the limited liability co	is hereby confirmed that the change(s) ity company or as otherwise provided in impany. Printed or typed name of signee

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Signature of Registered Agent