48771000017

(Requestor's Name)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
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SECRETARY OF STATE TALL AMASSES STORIO

A. RIVERS MAR - 7 2023

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	me of the limited liability company:DAYTONA17.	25NOVA	, LLC	
2. (a)	9671 S. ORANGE BLOSSOM TRAIL		(b) 9671 S. G	DRANGE BLOSSOM TRAIL
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(") <u></u>	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	ORLANDO, FL 32837		ORLANI	DO, FL 32837
	7/12/2016		L1600012	7787
3.	Date of filing/registration in Florida ALTON L. LIGHTSEY	4.	-	Document number
5. (a)	Registered Agent and Registered Office shown on the records	of the Flo	rida Dept, of Sta	ate:
	Registered Office Address (MUST BE FLORIDA STREE	ET ADDRI	ESS)	2022 SE TAI
	WINTER PARK	FL)	ECALIARY F
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u> 222 W COMSTOCK AVENUE <u>NEW Registered Office Address:</u>	red Office	address:	FILED 2022 DEC 22 PH 12: 16 SECALIARY OF STATE FALLAHASSEE, FLORID,
	SUITE 200			_
	WINTER PARK	FL_32789	·	_
change agent was/wa	imited liability company is not organized under the e or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of the street of the case of the member icles of organization or the operating agreement of the case o	the regist Hiability rs of the he limite	ered office a company, it limited liabil	nd the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in impany.
Signa	ture of a member or authorized representative of a member	_		Printed or typed name of signee
I here provisi the obi to mer notifie	by accept the appointment as registered agent and a ions of all statutes relative to the proper and comple ligations of my-position as registered agent as provi- ely reflect a change in the registered office address, d in writing of this change.	igree to de perfoi ded for i I hereby	act in this ca rmance of my n Chapter 60: confirm tha	pacity. I further agree to comply with the duties, and I am familiar with and accept 55. F.S. Or, if this document is being filed the limited liability company has been
Signatu	ire of Registered Agent			