Clorida Department of State

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone

: (307)200-2803

Fax Number

: (855)330.1010

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 RENTAL PROPERTY 6, LLC

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J.

Electronic Filing Menu — Corporate Filing Menu

J. HARRIS

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. N: | me of the limited liability company: RENTAL Pl | ROPERTY 6, LI | LC |
|----------------------------|--|---|---|
| | 2131 Arbuckle Rd | | 2131 Arbuckle Rd |
| - (117) | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | V-7-1 | Mailing address of limited liability company. (Note: MAY BE POST OFFICE BOX) |
| | SPRING HILL, FL 34608 | | SPRING HILL, FL 34608 |
| | | .÷ | |
| | | | |
| | 08/29/2016 | | L16000161388 |
| 3. | Date of filing/registration in Florida | 4. | Document number |
| 5. (a) | UNITED STATES CORPORATION AGE | NTS, INC. | |
| | Registered Agent and Registered Office shown on the records of | | |
| | 13302 WINDING OAK COURT | | 201 201 |
| | Registered Office Address (MUST BE FLORIDA STREE | <u>l',(DDRESS)</u> | |
| | A | | 2017 JUL 2 SELANAS |
| | TAMPA | L 33612 | 172 - Comment of the |
| | | | |
| (b) | | | 즉시 후 시간 |
| | Enter name of NEW Registered Agent and/or NEW Register | ed Office address | 24 210.2 |
| | 3030 N. Rocky Point Dr. | | |
| | NEW Registered Office Address: | | |
| | STE 150A | | |
| | | | |
| | Tampa | 1_33607 | |
| the ch agent | limited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the member fieles of organization or the operating agreement of the control o | of the registered of liability company s of the limited lia he limited liability | ffice and the business office of the registered, it is hereby confirmed that the change(s) bility company or as otherwise provided in company. |
| | Rilary Tank | | Riley Park Printed or typed name of signee |
| | ature of a member or authorized representative of a member | | warm day I meeting among to symmly with the |
| provis the ob- to me | oby accept the appointment as registered agent and a sions of all statutes relative to the proper and comple digations of my position as registered agent as provi rely reflect a change in the registered office address, od in writing of bus change. | ogree to act in this sie performance of ded for in Chapter I hereby confirm i | my daties, and I am familiar with and accept 605, F.S. Or, if this document is being filed that the limited liability company has been |

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