L17000054015

(Requestor's Name)						
(Address)						
(Address)						
(Cit	y/State/Zip/Phone	#)				
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	of Status				
Special Instructions to Filing Officer:						

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RA Change (Office)

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COVER LETTER

JHS18 (2/14)

'O :	Registration Section Division of Corporations				
HB.H	BUILDERS LAND ASSO)CIATE:	S		
O DO		of Limite	ed Liability Company		
ear S	ir or Madam:				
he en	closed Registered Agent/Registered Office	: Change	and fee(s) are submitted for filing.		
lease	return all correspondence concerning this	matter to	the following:		
₹ACI	HEL RODRIGUEZ				
	Name of Person				
3UILI	DERS LAND ASSOCIATES, LLC				
	Firm/Company	<u> </u>			
781	COSTA MAYA WAY UNIT #201				
	Address				
:STE	ERO, FLORIDA 33928				- ,
	City/State and Zip Code			رن څ	
rb11	70@gmail.com			:	∑; ;;;
E	-mail address: (to be used for future annua	l report n	otification)	15 32	1900 1900 1900 1900 1900 1900 1900 1900
or fur	ther information concerning this matter, pl	ease call:		٥	POWA AUS =
tache	el Rodriguez	239	834-7642	<u>သ</u>	SWOLL
	Name of Person	(Area Code & Daytime Telephone Number		
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
	Enclosed is a check for the following an	nount:			
	\$25 Filing Fee		\$55 Filing Fee & Certified Copy		

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.

(a)		(b)	
• /	Principal office address of limited liability company:	- `		Mailing address of limited liability company:
	(Note: MUST BE STREET ADDRESS) 3781 COSTA MAYA WAY UNIT #201		3781 CC	(Note: MAY BE POST OFFICE BOX) OSTA MAYA WAY UNIT #201
	ESTERO, FLORIDA 33928	_		D, FLORIDA 33928
	EOTENO, FEORIDA 33320	<u></u>		
	03/08/2017		L170000	54015
	Date of filing/registration in Florida	4.		Document number
(a)	RACHEL RODRIGUEZ			
•	Registered Agent and Registered Office shown on the records of the	e Florid	la Dept. of State	- e:
				_
	Registered Office Address (MUST BE FLORIDA STREET A.	<u>DDRES</u>	<u>S)</u>	
	3781 COSTA MAYA WAY UNIT #201			
	ESTERO	3392	8	-
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
(b)	N/A Kachel Kodriguez			
	Enter name of NEW Registered Agent and/or NEW Registered (Office a	ldress:	
	3781 Costa Maya Way Un	1+	201	3 17 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	NEW Registered Office Address:			9: S IA
			<u>. </u>	33 EE
	Estero .FL	7	3428	·
he li	imited liability company is not organized under the laws	s of the	State of Flo	orida, it is hereby confirmed that after
cha	inge or changes are made, the Florida street address of t	he reg	istered office	and the business office of the register
nt v s/we	will be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of	offity c	ompany, it is nited liabilit	s hereby confirmed that the change(s) y company or as otherwise provided in
arti	cles of organization or the operating agreement of the I	imited	liability con	ipany.
	Wal Subream	RA	CHEL RO	DRIGUEZ
	ture of a member or authorized representative of a member			Printed or typed name of signee

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

otified in writing of this change.

signature of Registered Agen

lod yau