L17000063153

(Requestor's Name)								
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'J. HORNE 'JUL 2 9 2024								

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COVER LETTER

TO:	Division of Corporations									
SUBJF	ECT: <u>[]</u>	80	Rib	C44	LLC iited Liability Company					
Door Si	ir or Madam:			Name of Em	incu maomy company					
15001 .71	ii or isaldaii.									
The end	closed Regist	ered Age	nt/Registered	l Office Chang	ge and fee(s) are submitted for filing.					
Please	return all cor	responde	ice concernii	ng this matter	to the following:					
Barbara	a Peden									
		Nam	e of Person							
Rib Cit	y Group									
		Firm	/Company							
6830 SI	hoppes at Plan	tation Driv	re #2							
		Ad	dress							
Fort My	yers, FL 3391	2								
		City/Stat	e and Zip Co	ode						
bpeden	@ribcity.com									
Е	-mail address	: (to be u	sed for futur	e annual repor	t notification)					
For furt	ther informat	ion conce	rning this ma	atter, please ca	all:					
Barbara	a Peden			23 at (9 275-6700					
	Nan	ne of Per	son		Area Code & Daytime Telephone Number					
	Mailing Ad	ldress:			Street Address:					
Registration Section					Registration Section					
Division of Corporations					Division of Corporations					
	P.O. Box 6			The Centre of Tallahassee						
	Tallahassed	. 11. 32.	5 4		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					
					rananassee, fil 32303					
	Enclosed is	a check	for the follo	wing amount:	:					
■ \$25 Filing Fee					S55 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.

L. Na	ime of the limited liability company:	10 R	b Cit	y, LLC	
7 (2)	, , ,		o)		
2. (d)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	tailing address of limited liability of the MAY BE POST OFFICE			
	13908 Palm Beach Blud	•	6830 Shopp	es at Plantation Drive	
	Fort Myers, FL 33905		Fort Myers,	FL 33912	
3	3-16-2017			000063187	3
3.	Date of filing/registration in Florida Dina Green	4.	l	Document number	
5. (a)	Registered Agent and Registered Office shown on the record 6830 Shoppes at Plantation Drive Registered Office Address (MUST BE FLORIDA STR				
	Fort Myers	_, FL_33912		2024 J	
(b)	Barbara Peden			اس.	
()	Enter name of NEW Registered Agent and/or NEW Regis	ldress:	, =: +===	• ·	
	6830 Shoppes at Plantation Drive #2			:-	
	NEW Registered Office Address:			() 2 -	
	Fort Myers	_, FL_ ³³⁹¹²			
change agent v was/we	imited liability company is not organized under the or changes are made, the Florida street address of the identical. Or, in the case of a Florida limitere authorized by an affirmative vote of the members of organization or the operating agreement of	of the registere ed liability co pers of the lim	ed office and empany, it is lited liability	the business office of the re- hereby confirmed that the ch- company or as otherwise pro-	gistered nange(s)
	Vical Peden	Paul	l Peden		
Signal	ure of a member or authorized representative of a member			Printed or typed name of signee	
provisi the obl to mere	by accept the appointment as registered agent and ons of all statules relative to the proper and compigations of my position as registered agent as property reflect a change in the registered office address in writing of this change.	d agree to act pleie performe wided for in C ss, I hereby co	in this capac ance of my di Thapter 605, onfirm that th	city. I further agree to computies, and I am familiar with F.S. Or, if this document is a limited liability company h	ly with the and accept being filed has been

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

Barbare a Redem

Signature of Registered Agent