## 117000111491

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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088 If there are any issues please contact Patrice at 850-202-9071

Date:	08/19/2024	
Name:	Patrice Rush	<del>_</del>
Reference #:	2464103	<u> </u>
Entity Name:	LMP AT ROW	LAND PLACE 201, LLC
☐ Article	es of Incorporation/Authorization	on to Transact Business
_	ge of Agent	
☐ Reinst	tatement	
☐ Conve	ersion	
☐ Merge	er	
Dissol	lution/Withdrawal	
Fictition	ous Name	
Other_		
Authorized A	mount: \$25.00	
Signature:	(Pall	

## 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.

Name of the limited liability company:			LMP AT ROWLAND PLACE 201, LLC			
	no change		o)	no change		
2. (4,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			failing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	5/22/2017			L17000111491		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a	REDDEN, DAVID H Registered Agent and Registered Office shown on the records of					
	Registered Agent and Registered Office shown on the records of	the Florida	a Dept. of State			
	Registered Office Address (MUST BE FLORIDA STREET)	4DDRESS	<u>27</u>			
	11600 NINTH ST N			202		
	ST. PÉTERSBURG , FL	3	3716	2024 AUG 20 AM 11: 26		
(b)	Cogency Global Inc.			20 FE		
	Enter name of NEW Registered Agent and/or NEW Registered Office address:					
	115 North Calhoun Street, Suite 4			1: 26		
	NEW Registered Office Address:					
	Tallahassee , FL	3	32301			
the ch agent was/w	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited hivere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	ws of the the regi ability co	stered office ompany, it is nited liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in		
	/s/ David Redden			David Redden		
Sign	ature of a member or authorized representative of a member			Printed or typed name of signee		
provis the ob to met	eby accept the appointment as registered agent and agressions of all statutes relative to the proper and complete digations of my position as registered agent as provide rely reflect a change in the registered office address, I we din writing of this change.	ee to ac perform d for in ( hereby c	t in this capa cance of my a Chapter 605, onfirm that t	city. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been		
	/s/ Michael Carlisle					
Signat	ure of Registered Agent Michael Carlisle, Assistant Sec	cretary				

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