

L17000 176 866

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

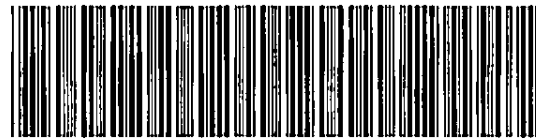
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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NATIONAL SERVICE INFORMATION, INC.
www.nsii.net

September 19, 2019

To Whom It May Concern:

Please file the enclosed Document and return a date stamped copy to my attention.

Should you have any questions, please do not hesitate to contact me. The number I can be reached at is 1-800-235-0337

Sincerely,

Jill Probst
Corporate Services Department
National Service Information, Inc
145 Baker St
Marion, Ohio 43302
jill@nsii.net

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: American Landowner Group, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gwendolyn C. Sutton, Paralegal

Name of Person

Frost Brown Todd LLC

Firm/Company

301 East Fourth Street, Suite 3300

Address

Cincinnati, OH 45202

City/State and Zip Code

gsutton@fbtlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gwendolyn C. Sutton

Name of Person

513

at (_____) _____

651-6133

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 amount:

☒ \$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.

1. Name of the limited liability company: American Landowner Group, LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

1703 McMullen Road, Suite 255

Safety Harbor, FL 34695

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

1703 McMullen Road, Suite 255

Safety Harbor, FL 34695

08/18/2017

L17000176866

3. Date of filing/registration in Florida

4. Document number

5. (a) CT Corporation System

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1200 South Pine Island Road

Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**

Broward County

Plantation, FL 33324

(b) NRAI Services, Inc.

Enter name of NEW Registered Agent and/or NEW Registered Office address:

1200 South Pine Island Road

NEW Registered Office Address:

Broward County

Plantation, FL 33324

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Charles M. Popa III, Manager of BlueSpark

[Signature]
Signature of a member or authorized representative of a member

Printed or typed name of signee

Enterprises LLC, Member

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]
Signature of Registered Agent

Asst. Secretary

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00