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COVER LETTER

INHS18 (2/14)

TO: Registration Section Division of Corporations					
SUBJECT: Zapote Prieto SDG RA, 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:					
Courtney Gatesman					
Name of Person					
Courtney W. Gatesman, PA. Firm/Company					
Firm/Company					
7332 Office par plau, Ste 101					
Address					
Milborne FL 37.440					
City/State and Zip Code					
Coursey Ogatesmentagal - Com E-mail address: (to be used for future annual report notification)					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Coultry Gatesman at (407) 720-4345 Name of Person Area Code & Daytime Telephone Number					
Name of Person Area Code & Daytime Telephone Number					
STREET/COURIER ADDRESS: MAILING ADDRESS:					
Registration Section Registration Section					
Division of Corporations Division of Corporations					
Clifton Building P.O. Box 6327					
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301					
Enclosed is a check for the following amount:					
☑ \$25 Filing Fee					

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FO LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability compa-submits the following statement in order to change its registered office or registered agent, or both, in the State Florida.

1. Na	me of the limited liability company: Zapote Po	ctcSD6	IRA, LLC
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Pochliage El 32917	 -	Reckledge FL 32555
	11/21/17		L17000241417
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Simser, alexandrea R.		
	Registered Agent and Registered Office shown on the records of	the Florida De	pt. of State:
	1961 South Harber Gry Dird, Sut les	<u> </u>	
	Registered Office Address (MUST BE FLORIDA STREET	<u>ADDRESS)</u>	
	Melboure. FI	32901	
(b)	Courney W. Gatesman		
	Enter name of <u>MÉW Registered Agent</u> and/or <u>NEW Registered</u>	<u>i Office addre</u> :	si 🐔 🐔
	1337 UPRIOPER PLAN, STE 101		
	NEW Registered Office Address:		
			
			
	me borne	. 32940	1
the char agent w	mited liability company is not organized under the lange or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limited line authorized by an affirmative vote of the members of	f the register iability comp	ed office and the business office of the register cany, it is hereby confirmed that the change(s)
the artic	eles of organization or the operating agreement of the	limited liab	ility company.
<u> </u>	in will	K	Printed or typed name of signee
_	ure of a member or authorized representative of a member		
- I herch -provisio -the obli	y accept the appointment as registered agent and ag ons of all statutes relative to the proper and complete gations of my position as registered agent as provide	ree to act in performanc ed för in Cha	this capacity. I further agree to comply with the of my duties, and I am familiar with and accepter 605, F.Ş. Or, if this document is being file

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 of Registered Agent