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(Req	uestor's Name)	
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D CUSHING

COVER LETTER

	gistration Section vision of Corporations	
SUBJECT	: LlASgow	Management LLC Name of Limited Liability Company
Dear Sir or	Madam:	
The enclose	ed Registered Agent/Registere	ed Office Change and fee(s) are submitted for filing.
Please retur	rn all correspondence concern	ing this matter to the following:
	Name of Person Glasgow M Firm/Company	14NACemant UC
	, -	
	/331 15+ & Address	teet N # 205
	Jackson Ville City/State and Zin C	Beach IL 31150 00
	orglasgow@Ms il-address: (to be used for futu- information concerning this n Laryow Name of Person	re annual report notification) natter, please call:
	niling Address: gistration Section	Street Address: Registration Section
	vision of Corporations	Division of Corporations
	D. Box 6327 Ilahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enc	closed is a check for the follo	iwing amount:
-	□ \$25 Filing Fee	

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: Clasqow	Management 110
1. Name of the limited liability company: GIASQUW 2. (a) 1331 IST STREET N	(b) 1331 1 St Street N
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
# 205	# 205
Jacksonville Beach, FL 32750	Jacksonville Beach, F1 32750
04/11/2018	L 17000 244 600
3. Date of filing/registration in Florida	4. Document number
5. (a) United States Corporation Agent Registered Agent and Registered Office shown on the records of the 13502 Winding Oak Court A Registered Office Address AUST BE FLORIDA STREET AD	
TAMPA ,FL	1 33612
(b) KAREN GlASgOW	3 1960 3 1960 3 1960
Enter name of NEW Registered Agent and/or NEW Registered O	
	28 28
1331 131 StreetN NEW Registered Office Address:	
# 205	
If the limited liability company is not organized under the laws change or changes are made, the Florida street address of the reagent will be identical. Or in the case of a Florida limited liability was/wefe authorized by an affirmative vote of the members of the articles of organization or the operating agreement of the line.	egistered office and the business office of the registered ility company, it is hereby confirmed that the change(s) the limited liability company or as otherwise provided in
Signature of a member or authorized representative of a member	Transactivity pear manie of digitee
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete pethe obligations of my position as registered agent as provided for merely reflect a change in the registered office address, I have notified in writing of this change. Signature of Registered Agent	to act in this capacity. I juriner agree to comply with the arformance of my duties, and I am familiar with and accept for in Chapter 605, F.S. Or, if this document is being filed reby confirm that the limited liability company has been
Division of Corporations • P.O. Bo	ox 6327• Tallahassee, FL 32314

FILING FEE: \$25.00