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| (Requestor's Name) | | | | |
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| Certified Copies | Certificate | s of Status | | |
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| Special Instructions to Filing Officer: | | | | |
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S. YOUNG



November 26, 2018

BINGHAMTON ITHACA OWEGO AFTON DEPOSIT HANCOCK UNADILLA

www.cglawoffices.com

PO Box 2039 Binghamton, NY 13902-2039 (607) 723-9511 (877) COUGHLIN Fax: (607) 723-1530

Registration Section
Division of Corporation
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Smith Site Development South LLC

Dear Sir/Madam:

Enclosed please find a Statement of Change of Registered Office or Registered Agent or both for Limited Liability Company and a check enclosed in the amount of \$25 to be filed by the Florida Corporations Division.

I have also included for your convenience a prepaid federal express slip to return the filing receipt. If you have any questions, please give me a call. Thank you.

Sincerely,

COUGHLIN & GERHART, LLP

Jaime Rezucha

By Jaime Rezucha Paralegal

Encl.

THE BUT 29 PH 4: 36

COVER LETTER

| TO: Registration Section Division of Corporations | | | |
|---|----------------|---|----------------------|
| SUBJECT: SMITH SITE DEVELOPME | ENT SOUT | | |
| | me of Limite | d Liability Company | |
| Dear Sir or Madam: | | | |
| The enclosed Registered Agent/Registered O | ffice Change | and fee(s) are submitted for filing. | |
| Please return all correspondence concerning t | his matter to | the following: | |
| JEREMY SMITH | | | 3 12 6 |
| Name of Person | <u></u> , | | 100元 |
| SMITH SITE DEVELOPMENT SOUTH | | | FILLE |
| | 7 LLC | | 29 28 88E |
| Firm/Company | | | 72 0 |
| 15925 OLD US HIGHWAY 441 | | | 14: 36 LORIU |
| Address | | | - EDA 36 |
| 15925 OLD US HIGHWAY 441 | | | |
| City/State and Zip Code | | | |
| WALTER@SMITHSITEDEV.COM | | | |
| E-mail address: (to be used for future an: | nust report n | olification) | |
| Por further information concerning this matter | , please call: | | |
| BRADY BEGEAL | 607 | 723-9511 | |
| Name of Person | | 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 | |
| INHS18 (2/14) | | | |

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

Presuant 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 affice or registered agent, or both, in the State of Florida.

| 1. Na | me of the limited liability company: SMITH SITE I | DEVELOPMENT | T SOUTH LLC |
|---|---|--|--|
| 2. (a) | 15925 OLD US HIGHWAY 441 | (b) 15925 OLD US HIGHWAY 441 | |
| , | Principal office address of limited liability company, (Nate: ALUST BE STREET ADDRESS) | | Mailing address of limited liability company: (Nate: MAY HE POST OFFICE BOX) |
| | 15925 OLD US HIGHWAY 441 | ТАМРА | , FL 32778 |
| | 12/7/2017 | L170002 | 51084 |
| ۱, | Date of filing/registration in Florida | 4. | Document number |
| . (a) | NORTHWEST REGISTERED AGENT, LLC | | |
| | Registered Agent and Registered Office shown on the records of the 3030 N. ROCKY POINT DRIVE | | l c : |
| | Registered Office Address (MUST BE FLORIDA STREET A SUITE 150A | DDRESS) | |
| | TAMPA , FL | 33607 | |
| (D) _ | WALTER SOJDA | | CRET NOV |
| 1 | Enter name of <u>NEW Repistured Apont</u> and/or <u>NEW Registered (</u> | Mice address: | SSS 29 |
| , | 15925 OLD US HIGHWAY 441 | | (1) c |
| i | NEW Registered Office Address: | | FLORIDA |
| , | TAVERAS , FL | 32778 | _ |
| e chang gent wi as/wen | nited liability company is not organized under the law- ge or changes are made, the Florida street address of t If be identical. Or, in the case of a Florida limited lial c authorized by an affirmative vote of the members of les of organization of the operating agreement of the li | he registered office offity company, it is the limited liabilit | e and the business office of the registered s hereby confirmed that the change(s) cy company or as otherwise provided in |
| <u> </u> | fur. L | JEREMY SM | |
| herely ovision e oblig merely utility i | e of crember or authorized representative of a member accept the appointment as registered agent and agrees of all standes relative to the proper and camplete pations of my position as registered agent as provided a reflect a mange in the registered office address. I he is verifixed in this plante. | e to act in this cape orformance of my for in Chapter 605 rehy confirm that | Printed or typed name of signee activ. I further agree to comply with the duties, and I am faultion with ind accept, F.S. Or, if this document is being filed the limited liability company has been |
| guaranc . | of Rekistered Agent | | |

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