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| (Red | questor's Name) | | | | | | |
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| (Add | dress) | | | | | | |
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| (City/State/Zip/Phone #) | | | | | | | |
| PICK-UP | ☐ WAIT | MAIL | | | | | |
| (Bus | siness Entity Nar | me) | | | | | |
| (Doc | cument Number) | | | | | | |
| Certified Copies | _ Certificate: | s of Status | | | | | |
| Special Instructions to F | Filing Officer: | | | | | | |
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COVER LETTER

| Division of Corporations | |
|--|--|
| SUBJECT: Ringling & Orange Name of Limited-Lia | 3, LLC ability Company |
| Dear Sir or Madam: | |
| The enclosed Registered Agent/Registered Office Change and for | ee(s) are submitted for filing. |
| Please return all correspondence concerning this matter to the fo | ollowing: |
| Rebecca Hunzeker Name of Person | _ |
| Capstone Management LLC Firm/Company | <u>-</u> |
| 101 Parameunt Drive Suit | . 160 |
| Sarascha, FL 34232 City/State and Zip Code | _ |
| E-mail address: (80 be used for future annual report notific | eation) |
| For further information concerning this matter, please call: | |
| Rebecce Honzeker at (941) Name of Person |) 413.4668 Area Code & Daytime Telephone Number |
| Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 |
| Enclosed is a check for the following amount: | |
| ☐ \$25 Filing Fee ☐ \$55 | 5 Filing Fee & Certified Copy |

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BO LIMITED LIABILITY COMPANY

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

1. Name of the limited liability company: Ringling + Orange 3 LLC

| 2 | Z., X | 0 | J | ١ | J | | | |
|------------------|------------------------|--|---|--|--|--|---|-------------------------------------|
| 2. | (a) | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | (b) | | Mailing address (Note: MAY) | | - | |
| | | 101 Paramount Drive Soit | <u>بر</u> الان | 101 | Paramo | J 11.0 |)+:v | <u> 't</u> _ |
| | | Schasota, FL 34232 | _ | San | useta. | FL | 342 | 3 |
| | | 12/12/2017 | | Li | 700 <u>0</u> 25 | | ર | |
| 3. | | Date of filing/registration in Florida | 4. | | Document nu | ımber | | |
| 5. | (a) | Cross Street Conjuncte S | معدراز د | es LL | ~ | | | |
| | | Registered Agent and Registered Office shown on the records of | the Florida | Dept. of Sta | te: | | | |
| | | 200 South Orange Ave | | | | | | |
| | | Registered Office Address (MUST BE FLORIDA STREET. | <u>ADDRESS</u> | <u>)</u> | _ | | | |
| | | | | | | | | |
| | | <u> </u> | 0.115 | 7.4 | - - | | | |
| | | Sarasota, FL | <u> </u> | 34 | | (1) [[]] | 2021 | |
| | (b) | Rebecca Hunzeker | | | | | 2021 SEP | - |
| | (0) | Enter name of NEW Registered Agent and/or NEW Registered | l Office add | dress: | _ | 7.5 | 1 | |
| | | | | | | 57. | 2 | - |
| | | 101 Paramount Drive | Su: | te 160 | 0 | SES - SES | AM 9: 44 | , כ |
| | | NEW Registered Office Address: | | | _ | -55 57 S | 9. | |
| | | | | | | L = 1 | F | |
| | | | | | _ | | | |
| | | Sarasota FI | 34 | 233 | | | | |
| | | .11 | - | | | | | |
| cha age wa | ange ent v is/we | limited liability company is not organized under the lave or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liatere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the | registere ability con of the limi limited li | d office an mpany, it i ited liabilit ability cor | nd the business is hereby confity company or name or n | s office of irmed that as otherv | the re the ch vise pr | gister range |
| | -14 | Jelica Hungehn | <u> </u> | <u> کو ل د د د</u> | Printed or type | ومولأور | | |
| | _ | ature of a member or authorized representative of a member | | | · • | | - | |
| no \ | | by accept the appointment as registered agent and agrifons of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address, I do not writing of this change. | ree to act performa d for in C hereby co | in this cap ince of my hapter 602 nfirm that | acity. I furthe duties, and I a 5, F.S. Or, if t the limited lia | er agree to un familio this docun thility con | o comp ir with ient is ipany i | oly wii and a being has be |
| 51 | gnatu | ure of Registered Agent | | | | | | |