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COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJE	PRICE VILLA'S, LLC				
		of Limited Liab	oility Company		
Dear Si	ir or Madam:				
The en	closed Registered Agent/Registered Office	Change and fe	e(s) are submitted for filing.		
Please	return all correspondence concerning this	matter to the fo	llowing:		
LISA	D. PRICE				
	Name of Person	 	•		
PRICE	E VILLA'S, LLC				
	Firm/Company		-		
3363	SHOAL CREEK COVE				
	Address		-		
CRES	STVIEW, FL 32539				
	City/State and Zip Code		•		
SBTG	OG2000@GMAIL.COM				
E	-mail address: (to be used for future annua	il report notifica	ation)		
For fur	ther information concerning this matter, pl	ease call:			
LISA	D. PRICE	850	603-1381		
	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	stration Section Registration Section ion of Corporations Division of Corporations on Building P.O. Box 6327 Executive Center Circle 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

10 miles

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. N	lame of the limited liability company: PRICE VILLA'S	o, LLC	•	
2. (a)	3363 SHOAL CREEK COVE	(b) 3363 SHOAL CREEK COVE		
(a	Principal office address of limited liability company:			Mailing address of limited liability company:
	(Note: MUST BE STREET ADDRESS)		0050T	(Note: MAY BE POST OFFICE BOX)
	CRESTVIEW, FL 32539	-	CRESTY	/IEW, FL 32539
	12/19/2017	-	L1700025	58000
3.	Date of filing/registration in Florida	4		Document number
5. (a	UNITED STATES CORPORATION AGENTS,	, INC.		
J. (a	Registered Agent and Registered Office shown on the records of the 13302 WINDING OAK COURT A	e Florida	Dept. of State	::
	Registered Office Address (MUST BE FLORIDA STREET AI	<u>DRESS</u>	2	
	TAMPA , FL 3	3612		19 AL
(b	LISA D. PRICE			
Ψ.	Enter name of NEW Registered Agent and/or NEW Registered O	ffice ad	lress:	ÿ
	3363 SHOAL CREEK COVE			일 : 물
	NEW Registered Office Address:			W 47
	CRESTVIEW, FL_3	2539		<u>.</u>
the chagent was/v the ar	limited liability company is not organized under the laws ange or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liability authorized by an affirmative vote of the members of teles of organization or the operating agreement of the liability.	he regis pility co the lim mited l	stered office mpany, it is ited liability	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in inpany.
Sign	aute of a member or authorized representative of a member			Printed or typed name of signee
provi. the ol to me notifi	eby accept the appointment as registered agent and agree sions of all statutes relative to the proper and complete po- ligations of my position as registered agent as provided sely reflect a change in the registered office address, I he all in writing of this change.	e to act erform for in (reby co	in this cape ince of my e chapter 605 onfirm that	acity. I further agree to comply with the duties, and I am familiar with and accept , F.S. Or, if this document is being filed the limited liability company has been