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(((H18000167169 3)))



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Division of Corporations

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From:

Account Name : BARNETT, BOLT, KIRKWOOD, LONG & KOCHE, P.A.

Account Number : 072731001155 Phone : (813)253-2020 Fax Number : (813)251-6711

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

| | | 3. |
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LLC REGISTERED AGENT CHANGE 56 SANDPIPER, LLC

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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. N | ame of the limited liability company:56 SANI | DPIPER, LLO | C | |
|------------------------------|--|---|---|--|
| 2. (a) | | (ъ) | · | |
| | Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS) | | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | |
| | 601 Bayshore Blvd., Suite 700 | _ | 601 Bayshore Blvd., Suite 700 | |
| | Tampa, FL 33606 | _ · · · | Tampa, FL 33606 | |
| | 03/23/2018 | | L18000074641 | |
| 3. | Date of filing/registration in Florida | 4. | Document number | |
| 5. (a) | Donald B. Linksy | | | |
| | Registered Agent and Registered Office shown on the records of Registered Office Address (MUST BE FLORIDA STREET) | - | of State: | |
| | | 1112/11/02/ | | |
| | 1509 Sun City Center Plaza, Ste. B | | | |
| | Sun City Center , FL | 33573 | <u> </u> | |
| (b) | Peter T. Kirkwood | | - " | |
| (p) | Enter name of NEW Registered Agent and/or NEW Registered | Office address: | | |
| | | | φ. | |
| | Vinus II. 105 All | | ىن دى | |
| | NEW Registered Office Address: | 6 | | |
| | 601 Bayshore Blvd., Suite 700 | | | |
| | Tampa | 33606 | • | |
| | , FL | 23000 | | |
| the cha agent v was/wa | imited liability company is not organized under the layinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited light authorized by an affirmative vote of the members of the operating agreement of the | the registered bility compan of the limited li | office and the business office of the registered by, it is hereby confirmed that the change(s) iability company or as otherwise provided in | |
| X | To Sic | C. | C. Steven Yerrid | |
| | lure of a member of authorized representative of a member | | Printed or typed name of signee | |
| | by accept the appointment as registered agent and agrees ons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I do writing of this change. The of Registered Agent Peter T. Kirkwood | ee to act in thi performance to d for in Chapte nereby confirm | is capacity. I further agree to comply with the of my duties, and I am Jamiliar with and accept of the first | |
| , | Division of Corporations P.O. E | Box 6327● Tal EE: \$25.00 | linhassee, FL 32314 | |
| 115:077 | (lax | : | | |

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