

# L18000093726

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
 Fax Number : (850)617-6383

From: Account Name : CAPITOL SERVICES, INC.  
 Account Number : I20160000017  
 Phone : (800)345-4647  
 Fax Number : (800)432-3622

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

Email Address: \_\_\_\_\_

**LLC REGISTERED AGENT CHANGE**  
**L4 WATSON REAL ESTATE HOLDINGS, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

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APR 20 2018

**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: L4 WATSON REAL ESTATE HOLDINGS, LLC

2. (a) \_\_\_\_\_ (b) \_\_\_\_\_  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

1157 Sweet Heather Lane 1157 Sweet Heather Lane  
Apopka, FL 32712 Apopka, FL 32712

3. 04/13/2018 4. L18000093726  
Date of filing/registration in Florida Document number

5. (a) Capitol Services, Inc.  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
515 East Park Avenue Floor 2  
Tallahassee, FL 32301

(b) Capitol Corporate Services, Inc.  
Enter name of NEW Registered Agent and/or NEW Registered Office address:  
Same as above  
NEW Registered Office Address:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_, FL \_\_\_\_\_

18 APR 19 PM 4:09  
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TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature] JEFFREY E. DECKER  
Signature of a member or authorized representative of a member Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Kim Tadlock Kim Tadlock, Asst. Sec. on behalf of  
Capitol Corporate Services, Inc.  
Signature of Registered Agent