Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000336838 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Phone

: (855)330-1010 Fax Number

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

Email	Address:_		
-------	-----------	--	--

LLC REGISTERED AGENT CHANGE EIGENHOME, LLC

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

T. CLINE NOV 28 20 18 EXAMINER

Electronic Filing Menu — Corporate Filing Menu

Help

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.

Name of the limited liabilit	y company: Eigenho	ome, LL	.C			
(a) 2563 THIRD ST	563 THIRD ST			Γ		
Principal office addre	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
FORT MYERS, FL	33901	<u> </u>	FORT MYERS,	FL 33901		
05/08/2018		 L	18000115761			
	egistration in Florida	4.	Document i	number		
(a) KENNY, JOEL J						
Registered Agent and Registered 2563 THIRD ST Registered Office Address						
FORT MYERS	T MYERS			MIN NOV 27 AM		
· · · · · · · · · · · · · · · · · · ·	egistered Agent red Agent and/or NEW Registe ky Point Dr.		ess	8: 55		
NEW Registered Office Add	fress.					
STE 150A						
		_{FL} 33607				

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.

Morgan Jobben	Morgan Noble		
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 applied in writing of this change.

fied in writing of this change.

The Glover -Manager

Signature of Registered Agent