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(Business Entity Name)						
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2021 HAY 10 AM 9: 28

COVER LETTER

	istration Section ision of Corporations		· •			
SUBJECT:	CARPENTER FARMS INVESTMENTS, LLC					
	Name of Limited Liability Company					
Dear Sir or l	Madam:					
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.						
Please return	n all correspondence concerning this	matter to the fo	ollowing:			
BRADLEY J	. CARPENTER					
_	Name of Person		_			
CARPENTE	R FARMS INVESTMENTS, LLC					
	Firm/Company		-			
5001 COLLI	NS AVE, PH. 1					
	Address		_			
MIAMI BEA	CH, FL 33140					
	City/State and Zip Code		_			
BRAD.CARE	PENTER@RIDGETOPCAPITAL.COM	I				
E-mail	address: (to be used for future annu-	al report notific	ation)			
For further in	nformation concerning this matter, p	lease call:				
BRAD CARP	PENTER	412 at (551-0168			
	Name of Person	(Area Code & Daytime Telephone Number			
Reg Divi P.O.	ling Address: istration Section ision of Corporations Box 6327 ahassee, 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:						
■ \$2	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

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.

	ame of the limited liability company: CARPENTER FA 5001 COLLINS AVE	RMS I		DLLINS AVE
2. (a)	Principal office address of limited liability company:	<u> </u>	(b)	Mailing address of limited liability company:
	(Note: MUST BE STREET ADDRESS) PH 1		PH 1	(Note: MAY BE POST OFFICE BOX)
	MIAMI BEACH, FL 33140	<u> </u>	MIAMI	BEACH, FL 33140
	05/21/2018		L1800012	9539
3. 5. (a)	Date of filing/registration in Florida ARCABIZ	4.		Document number
5. (a)	Registered Agent and Registered Office shown on the records of the 3785 NW 82ND AVE.	he Flori	da Dept. of Su	ate:
	Registered Office Address (MUST BE FLORIDA STREET A	DDRE.	<u> </u>	
	DORAL , FL	33166		.021 H
(b)	BRADLEY J. CARPENTER		-	2021 HAY TO AM 9: 28
	Enter name of NEW Registered Agent and/or NEW Registered	Office a	ddress:	
	5001 COLLINS AVE			9.
	<u>NEW</u> Registered Office Address: PH 1			- RDS 28
	MIAMI BEACH . FL	33140	-	
change agent w was/we the arti	mited liability company is not organized under the laws or changes are made, the Florida street address of the rill be identical. Or, in the case of a Florida limited liabre authorized by an affirmative vote of the members of class of organization or the operating agreement of the limited liabre.	egiste pility o the li- imited	red office ar ompany, it nited liabili liability cor	nd the business office of the registered is hereby confirmed that the change(s)
	ure of a member or authorized representative of a member			Printed or typed name of signee
he obli o mere	y accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete parties of my position as registered agent as provided by reflect a change in the registered office address, I he in writing of this change	e to accerform	t in this cap nance of my Chapter 60, confirm that	pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
Signatur	e of Registered Agent			

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00