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.

(((H21000265327 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 : M. BURR KEIM COMPANY

Account Number: I19990000242 : (215)563-8113 : (215)977-9386 Fax Number

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

Email Address:_____

LLC REGISTERED AGENT CHANGE FV FREEDOM, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

To: (((H21000265327 3)))

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: FV FREEDOM, LLC					
2	(a)	985 Ocean Drive	(b) 985 Ocean Drive		
۷.	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability (Note: MAY BE POST OFFIC		
		Cape May, NJ 08204	Cape May, NJ 08204		
		Cape May, NJ 00204	Cape May, NO 00204		
		7/13/2018	L18000169639		
3.		Date of filing/registration in Florida	4. Document number		
5.	(a)	W. Bradley Munroe, Esq.			
0.	(4)	Registered Agent and Registered Office shown on the records	of the Florida Dept. of State:	, •	
		239 E. Virginia Street		: =	
		Registered Office Address (MUST BE FLORIDA STREET	TADDRESS)	=	
				FILED	
		Tallahassee	FL 32301	FILED	
				ō.	
	(b)	Registered Agents Inc.		32	
		Enter name of NEW Registered Agent and/or NEW Registe	ed Unice address:		
		7901 4th St N			
		NEW Registered Office Address:			
		STE 300			
		St. Petersburg	_{FL} 33702		
- fh	e cha	imited liability company is not organized under the inge or changes are made, the Florida street address	DI HIG LEGISCIEN DITTE AND THE DUSTICES OFFICE OF	inc regionales	
ao	ent s	will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the membe	Hability company, it is never continued that the	Change(a)	
th	e art	icles of organization of the operating agreement of	he limited liability company.		
	کے۔	arightol.	Barry Cohen Printed or typed name of signer		
		ture of a member or authorized representative of a member	* •	noly with the	
pr th to no	nerc ovis e ob mer uilie	by accept the appointment as registered agent and ions of all statutes relative to the proper and compl ligations of my position as registered agent as prov ely reflect a change in the registered office address d in writing of this change.	iste performance of my duties, and I am familiar wided for in Chapter 605, F.S. Or, if this document I hereby confirm that the limited liability compan	th and accept is being filed y has been	
_	5	Bill Havre - Assis	ant Secretary		
S	ignati	re of Registered Agent			
			N. D C227 - Tallaharana EL 22214		

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