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COVER LETTER

	gistration Section rision of Corporations							
CHD IECT.	JGS LAND DEVELOPMENT, L	.LC						
SUBJECT: Name of Limited Liability Company								
Dear Sir or	Madam:							
The enclose	ed Registered Agent/Registered	Office Change and	I fee(s) are submitted for filing.					
Please retur	n all correspondence concerning	this matter to the	following:					
Joseph P. Co	ovelli, Esq.							
	Name of Person							
Johnson Pop	e Bokor Ruppel & Burns LLP							
	Firm/Company							
400 N Ashle	y Drive, Suite 3100							
	Address							
Tampa, FL 3	33602							
	City/State and Zip Coo	ie						
jcovelli@jpf	firm.com							
E-mai	il address: (to be used for future	annual report noti	fication)					
For further	information concerning this mat	tter, please call:						
Joseph P. Co	ovelli	813 at (225-2500					
	Name of Person		Area Code & Daytime Telephone Number					
Re Di P.0	ailing Address: gistration Section vision of Corporations O. Box 6327 Ilahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					
En	closed is a check for the follow	ving amount:						
a	\$25 Filing Fee	0	\$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.

1 8	ame of the limited liability company:	ELOPM	ENT, LLC				
			b)				
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ \	· · · · · · · · · · · · · · · · · · ·	Mailing address of l	limited liability company: POST OFFICE BOX)		
	635 Court Street, Suite 120		635 Court	Street, Suite 120			
	Clearwater, FL 33756	_ _	Clearwater	r, FL 33756			
	08/16/2018		L180001969	917			
3.	Date of filing/registration in Florida	- 4.		Document num	ber		
E (a))						
5. (a	Registered Agent and Registered Office shown on the records of	the Florid	la Dept. of Stat	e:			
	PHILLIPS, DAVID R. ESQ.				2024 MAR SECRETA		
	Registered Office Address (MUST BE FLORIDA STREET	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
	1314 S. Fort Harrison Avenue, Suite A			_	和R 2		
	Clearwater, FI	33756		 -	· · · · · · · · · · · · · · · · · · ·		
					ED AMIO: 48		
(b)	Enter name of NEW Registered Agent and/or NEW Registered	1.00		-			
	Enter name of NEW Registered Agent and/or NEW Registered	1 Office 1	garess.		·: œ		
	JOHNSON POPE BOKOR RUPPEL & BURNS LLP	<u> </u>		_			
	NEW Registered Office Address:						
Attn: Joseph P. Covelli, Esq., 400 N. Ashley Drive, Suite 3100							
	Tampa, F	33602		_			
changagent was/v the ar	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere adhorized by an affirmative vote of the members tiples of organization or the operating agreement of the members of a member of the appointment as registered agent and ages ions of all statutes relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered affice address. I add in writing of this change.	ability of the li	company, it i mited liability liability cor	is hereby confirm ty company or as mpany. Printed or typed r	ned that the change(s) so otherwise provided in name of signee		