Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

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 ISLAND PROPERTIES MANAGEMENT, LLC

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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.

		(b)		
Principal office address of limited habiti (Note: MUST BE STREET ADD				Mailing address of limited liability comp (Note: MAY BE POST OFFICE BO	-
09/03/18			L180002	210221	
Date of filing/registration in Fl	lorida	4.		Document number	
CT CORPORATION SYSTEM					
Registered Agent and Registered Office shown of	on the records of the	Florid	la Dept. of State	· · ·	
1200 SOUTH PINE ISLAND	RD.				
Registered Office Address (MUST BE FLO	RIDA STREET ADI	DRES	<u>(S)</u>	₩, <u></u>	
Plantation	FI3:	332	4	ET AUG 2	
Northwest Registered			4	EL AUG 25 Pr	2
	Agent LL	.C		PI AUG 25 PA) 5 -
Northwest Registered	Agent LL	.C		TALL WINSSIE PLONING	24 - 21
Northwest Registered Enter name of NEW Registered Agent and/or	Agent LL	.C		21 AUG 25 PR 1 STATUS	24 - 07
Northwest Registered Enter name of NEW Registered Agent and/or ? 7901 4th St N	Agent LL	.C		21 AUG 25 PR 11 STATE ALL	22 - 27

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.

Margan Polle	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 notified in writing of this change.

Glover - Assistant Secretary

Signature of Registered Agent