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.

(((H19000292092 3)))



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

()	

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.

Fmail	Address:	
CING T C	MUUI C33.	

LLC REGISTERED AGENT CHANGE WEBB PROPERTIES AND DEVELOPMENT LLC

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

(11)

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.

1 110716	1464,		
l. N	Same of the limited liability company: Webb p	roperties	s and development LLC
2. (a)	1018 INDIAN TRACE CIRCLE	(b) 10	018 INDIAN TRACE CIRCLE
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	108	10	08
	WEST PALM BEACH, FL 33407	<u>w</u>	EST PALM BEACH, FL 33407
	10/29/18	L18	8000253234
3.	Date of filing/registration in Florida	4.	Document number
5. (a	, UNITED STATES CORPORATION AGEN	ITS, INC.	
(Registered Agent and Registered Office shown on the records	of the Florida Dep	of, of State:
	5575 S. SEMORAN BLVD		
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	
	Suite 36		5
	Orlando	FL 32822	
		rL	
(b)	Registered Agents Inc.		
(**)	Enter name of NEW Registered Agent and/or NEW Register	red Office address	
	7901 4th St N		
	NEW Registered Office Address:		<u></u> ≗
	STE 300		
	St. Petersburg	FL 33702	
the chagent was/v	limited liability company is not organized under the nange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member ticles of organization or the operating agreement of the street of	of the registere Hiability compars of the limited the limited habi	ed office and the business office of the registered any, it is hereby confirmed that the change(s) I liability company or as otherwise provided in Ility company.
Sion	nature of a member or authorized representative of a member	Riley P	Printed or typed name of signee
		norge to act in t	and the second of the second o
provi. the ol to me	rehy accept the appointment as registered agent and cisions of all statutes relative to the proper and complebligations of my position as registered agent as provi wrely reflect a change in the registered office address, and writing of this change.	ete performance ded for in Chap I hereby confir	e of my duties, and I am familiar with and accept pter 605, F.S. Or, if this document is being filed rm that the limited liability company has been

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

- Assistant Secretary

Bill Havre

Signature of Registered Agent