## L18000283202

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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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TO:	Registration Section
	Division of Corporations

TENANT'S CHOICE, LLC

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SUBJECT:

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

R. Wesley Bradshaw, Esq.

Name of Person

Bradshaw & Mountjoy, P.A.

Firm/Company

209 Courthouse Square

Address

Inverness, FL 34450

City/State and Zip Code

rwb@bradshawmountjoy.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

R. Wesley Bradshaw	352 at (	726-1211
Name of Person		Area Code & Daytime Telephone Number
Mailing Address:		Street Address:
Registration Section		Registration Section
Division of Corporations		Division of Corporations
P.O. Box 6327		The Centre of Tallahassee
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810
		Tallahassee, FL 32303

## Enclosed is a check for the following amount:

■ \$25 Filing Fee

□ \$55 Filing Fee & Certified Copy

## 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.

(a)		(b					
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		М	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	10684 N. FRANTZ AVENUE		( <u>NORE: MAY BE FOST OFF</u> 10684 N. FRANTZ AVENUE			<u>, , , , , , , , , , , , , , , , , , , </u>	
	CITRUS SPRINGS, FL 3443		CITRUS SPRINGS, FL 3443				
			<del>1912</del>				
	DECEMBER 10, 2018		L1800028320		<u></u>		
	Date of filing/registration in Florida	4.	Ι	Document number			
(a)							
	Registered Agent and Registered Office shown on the record: BATSEL, ROBERT W, JR.	s of the Florida	Dept. of State:	:			
		ET ABBRESS					
	Registered Office Address (MUST BE FLORIDA STRE) 1531 SE 36TH AVENUE	<u>e i Address</u>	!				
	OCALA	.FL_34471					
					2022		
(b)					SE		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ered Office ad	I <u>ress</u> :	AH	2022 SEP 12	<u></u>	
	R. WESLEY BRADSHAW, ESQ.			ALLAHASSEF			
	NEW Registered Office Address:				h i': Hd		
	209 COURTHOUSE SQUARE				÷ F		
	INVERNESS	34450 FL					
ange ent-v s/wo	imited liability company is not organized under the or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the membe cless of organization or the operating agreement of	the registere d liability con rs of the lim	d office and npany, it is ited liability	the business offic hereby confirmed company or as off	e of the that the	e registered e change(s)	
	$\wedge$	ATHAN D J	ARRELL				
Signa	ture of a member or authorized representative of a member	-		Printed or typed name	of signe	re	
ovisi v obl mera	by accept the appointment as registered agent and ons of all statutes relative to the proper and compl- igations of my position as registered agent as prov ely relieva change in the registered office address We writing of this change.	agree to act ele performa ided for in C , Thereby co	in this capae nce of my di hapter 605, nfirm that th	city. I further agre uties, and I am fan F.S. Or, if this do he limited liability	re to co niliar w cumen compa	mply with the with and acce t is being file ny has been	

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