

# L19 000019252

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6383

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LLC REGISTERED AGENT CHANGE  
2514 SHONEZ REALTY LLC

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

T. CLINE  
FEB 11 2019  
EXAMINER

2019 FEB -8 AM 10:12

# 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: 2514 SHONEZ REALTY LLC

2. (a) Principal office address of limited liability company:  
(Note: MUST BE STREET ADDRESS)  
1508 Pea Pond Road  
N Bellmore, NY 11710

(b) Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)  
1508 Pea Pond Road  
N Bellmore, NY 11710

3. 01/23/2019 Date of filing/registration in Florida

4. L19000019252 Document number

5. (a) TERESA BILLS  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State.

Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)  
16547 Falcon Ridge Rd  
Lithia FL 33547

(b) TERESA BILLS  
Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:  
16922 FALCONRIDGE RD

Lithia FL 33547

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.

Billy Singh  
Signature of a member or authorized representative of a member

BILLY SINGH  
Printed or typed name of signer

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.

Teresa Bills  
Signature of Registered Agent

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

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