## Florida Department of State

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(((H230000460363)))



H230000460363ABCY

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

2023

Account Name : INCORP SERVICES INC

Account Number : 120120000007 Phone : (702)866-2500 Fax Number : (702)900-2290

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: Managedreports@incorp.com

## LLC REGISTERED AGENT CHANGE THE PALMS AT DAYTONA LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
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Help

K. Brumbley

## COVER LETTER TO: Registration Section Division of Corporations The Palms at Daytona LLC 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: Taylor Santizo Name of Person InCorp Services, Inc. Firm/Company 3773 Howard Hughes Pkwy Suite 500S Address Las Vegas, NV 89169-6014 City/State and Zip Code Managedreports@incorp.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Taylor Santizo for InCorp Services, Inc. 800-246-2677 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:

2 \$25 Filing Fee

□ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FO LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability compassions the following statement in order to change its registered office or registered agent, or both, in the State Florida.

(a)	(b)	
Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
2311 Peppercorn St	231	1 Peppercorn St
Kissimmee, FL 34741	Kiss	immee, FL 34741
02/04/2019	L190	00035693
Date of filing/registration in Florida	4.	Document number
(a) Irby, Lilljan K	•	
Registered Agent and Registered Office shown on the records of	of the Florida Dept. o	of State:
2311 Peppercorn St		
Registered Office Address (MUST BE FLORIDA STREET	TADDRESS)	<del></del>
Kissimmee , F	7L34741	
b) InCorp Services, Inc.		202:
Enter name of NEW Registered Agent and/or NEW Registered	ed Office address:	
3458 Lakeshore Drive		
NEW Registered Office Address:		
regricies Office Address.		. <u> </u>
	<del></del>	5
Tallahassee , F	132312	<del>४</del>
e limited liability company is not organized under the la change or changes are made, the Florida street address of it will be identical. Or, in the case of a Florida limited li- were authorized by an affirmative vote of the members inticles of organization or the operating agreement of the	of the registered of liability company of the limited lia	office and the business office of the registe y, it is hereby confirmed that the change(s) ability company or as otherwise provided i
nature of a member or authorized representative of a member		Printed or typed name of signee

Louise Breytenbach on behalf of InCorp Services, Inc.

Signature of Registered Agent

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