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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

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

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LLC REGISTERED AGENT CHANGE AMERICAN SIGNATURE HOMES LLC

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To: 18506176383

From: Registered Agents Inc.

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.

L 8	ame of the limited liability company: AMERICAN SIGN	MATURE HO	MES LLC			
2. (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)			
	03/25/2019	 L	19000081056			
3.	Date of filing/registration in Florida	<u>-</u>	Document number			
5 (0)	HERNANDEZ, CARLOS L					
5. (a)	Registered Agent and Registered Office shown on the records of	Dept. of State:				
	8626 FINSEN S1					
	Registered Office Address (MUST BE FLORIDA STREET)	2024 FEB - 6 A SECULLAHASS				
	ORLANDO, FL	32827	AHAS			
(b)	Northwest Registered Agent LLC Enter name of NEW Registered Agent and/or NEW Registered	mo. e				
	7901 4th St N					
	NEW Registered Office Address:					
	STE 300					
	St. Petersburg	33702				
the cha agent was/w the art	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the registe ability com of the limite	ared office and the business office of the registered pany, it is hereby confirmed that the change(s) and liability company or as otherwise provided in bility company.			
,	nure of a member or authorized representative of a member		Printed or typed name of signee			
provis the ob- to mer notifig	hy accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. It d in writing of this change.	performan d för in Ch herchy con	i this capacity. I further agree to comply with the ce of my duties, and I am Jamiliar with and accept apter 605, F.S. Or, if this document is being filed firm that the limited liability company has been			
- / Van	Taylor Newman - Assistant S	ecretary				