L19 000 103 916

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



000424520110

02/28/31 -01017--011 **205.00

2024 FEB 28 AM 8: 50



COVER LETTER

TO: Registration Section Division of Corporations	
Big River RE LLC SUBJECT:	
	Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Cha	nange and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	ter to the following:
Andrew Pierce	
Name of Person	20
Cindy's Florida LLC	2024 FEB 28 AM 8: 50
Firm/Company	B 28
8051 N. Tamiami Trail STE E6	EB 28 AM 8: F
Address	
Sarasota, Florida, 34243	O
City/State and Zip Code	
reports@cloudpeaklaw.com	
E-mail address: (to be used for future annual rep	port notification)
For further information concerning this matter, please	e call:
Andrew Pierce	307 683-0983
Name of Person	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amount	unt:
■ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

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. N	Iame of the limited liability company: Big River RE LL	C 						
2. (a)	8051 N. Tamiami Trail STE E6		(b) _)51 N. Ta	umiami Trail STE E6	j		
Σ. (α)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(5)	M	Mailing address of limit (Note: MAY BE PO	_	-	_
	Sarasota, Florida, 34243		Sa	rasota, Fl	lorida, 34243			
	04/16/2019		L19	0001039	16			
3.	Date of filing/registration in Florida	4.	_]	Document number	_		
5. (a	Diaz, Victoria							
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 4468 Dogwood Circle				:	1. 2.	2024 F	- 4577 1787
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					ALLMINSSEE	EB 28	1 1
	Weston , FI	33331			ASSE ASSE			
(b)	Cindy's Florida LLC						8: 5	المحصيدة
	Enter name of NEW Registered Agent and/or NEW Registered	l Office 1	ddres	<u>s</u> :		·:	ن	
	8051 N. Tamiami Trail STE E6							
	NEW Registered Office Address:							
	Sarasota , FI	34243						
chang agent was/v	limited liability company is not organized under the large or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization of the operating agreement of the	registe ability of of the li limited	red of compa mited l liabi	ffice and any, it is liability lity com	I the business offic hereby confirmed company or as off	e of the that	register change	ed (s)
Sion	nature of a member or authorized representative of a member	At	ndrew	Pierce	Printed or typed name	of signee		
I her provi the oi to me notifi	eby accept the appointment as registered agent and agressions of all statutes relative to the proper and complete oligations of my position as registered agent as provide rely reflect a change in the registered office address, I sed in writing of this change.	ree to a perfori d for in hereby	ct in t nance Chap confir	his capa e of my d oter 605, m that ti	7.	_		th the accept g filed een
Signa	ture of Registered Agent							