## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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## LLC REGISTERED AGENT CHANGE GREENWORLD HOLDINGS LLC

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Corporate Filing Menu

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Electronic Filing Menu

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

Foley & Lardner LLP

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	lame of the limited liability company:	RLD HO	DINGS LLC	·		·
2. (a)	8419 Sunstate Street	(h	(b) 8419 Sunstate Street			
2. (3)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Maili	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)		
	Tampa, FL 33634		Tampa, FL	33634		
		<u>.</u>		<del> </del>		
	06/27/2019		L190001	60647		
3.	Date of filing/registration in Florida	- 4	Do	cument number		
5. (a	CF Registered Agent, Inc.					
J. (a	Registered Agent and Registered Office shown on the records of	The Florida	Dept. of State:			
	100 S. Ashley Drive					
	Registered Office Address (MI/ST BE FLORIDA STREET ADDRESS)					
	Suite 400					
	Tampa	33602				
	, F		· · · · · · · · · · · · · · · · · · ·			
(b)	F&L Corp.			77.00	2(	
\-\ \-\	Enter name of NEW Registered Agent and/or NEW Registere	d Office add	ress:		)20 .	
	One Independent Drive				2020 JAN	
	One Independent Drive			); ;;	1	* Turking
	NEW Registered Office Address:			****	<u> </u>	7
	Suite 1300			-	Æ	7
	lanta and We	22202		•	; :	$\cup$
	Jacksonville F.	3 <b>2202</b>		\$7.	-	
the chagent was/w	limited liability company is not organized under the la lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited I were authorized by an affirmative vote of the members ticles of organization of the operating agreement of the	of the registiability controlled in the limited limite	tered office an mpany, it is he ited liability co	d the business of reby confirmed to empany or as oth	ffice of t that the o	he registered change(s)
Sign	ature of a member or authorized representative of a member	761		nted or typed name	of signee	
I here provis the ob- ta me notifie	why accept the appointment as registered agent and ay sions of all statutes relative to the proper and completed agent as provide a reflect a change in the registered agent as provided in writing of this change.  The provided in writing of this change.					

Division of Corporations P.O. Box 6327\* Tallahassee, FL 32314 F1LING FEE: \$25.00