

Division of Corporations

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L19000160657

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : FOLEY & LARDNER

Account Number : I19980000047

Phone : (407) 423-7656

Fax Number : (407) 648-1743

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

Email Address: _____

**LLC REGISTERED AGENT CHANGE
SPARTAN CITY HOLDINGS LLC**

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

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12/20/2019 4:49:30 PM PAGE 1/001 Fax Server



December 20, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

FOLEY & LARDNER

SUBJECT: SPARTAN CITY HOLDINGS LLC
REF: L19000160657

We have received your document for SPARTAN CITY HOLDINGS LLC . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Filing fee should be \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Mel Solomon FAX Aud. #:
Regulatory Specialist II Supervisor Letter Number: 219A00025998

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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: <u>SPARTAN CITY HOLDINGS LLC</u>	
2. (a) <u>8419 Sunstate Street</u> Principal office address of limited liability company: (Note: <u>MUST BE STREET ADDRESS</u>) <u>Tampa, FL 33634</u>	(b) <u>8419 Sunstate Street</u> Mailing address of limited liability company: (Note: <u>MAY BE POST OFFICE BOX</u>) <u>Tampa, FL 33634</u>
3. <u>06/27/2019</u> Date of filing/registration in Florida	4. <u>L19000160657</u> Document number
5. (a) <u>CF Registered Agent, Inc.</u> Registered Agent and Registered Office shown on the records of the Florida Dept. of State: <u>100 S. Ashley Drive</u> Registered Office Address (MUST BE FLORIDA STREET ADDRESS) <u>Suite 400</u> <u>Tampa</u> , FL <u>33602</u>	
(b) <u>F & L Corp.</u> Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> : <u>One Independent Drive</u> <u>NEW Registered Office Address</u> : <u>Suite 1300</u> <u>Jacksonville</u> , FL <u>32202</u>	

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.

<u>[Signature]</u> Signature of a member or authorized representative of a member	<u>Kevin Collins</u> Printed or typed name of signer
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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.

[Signature]
Signature of Registered Agent Randolph J. Wolfe

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

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