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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : PAVESE LAW FIRM Account Number : I20130000057

Phone Fax Number : (239)334-2195 : (239)332-2243

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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4 SEP 19 PM 313 GIT TOOPPONT HE TELLANOSEE, FLORID

LLC REGISTERED AGENT CHANGE DIVERSIFIED LAND HOLDINGS OF SWFL LLC

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K. SALY

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COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJE	Diversified Land Holdings of SV	Diversified Land Holdings of SWFL LLC					
	- 	Name of Limited Liability Company					
Dear Si	r or Madam:						
The end	closed Registered Agent/Registered	Office Change and	fee(s) are submitted for filing.				
Please r	eturn all correspondence concerning	this matter to the	following:				
Charle	es B. Capps, Esq.						
	Name of Person						
Pavese	Law Firm						
	Firm/Company						
1833 H	Hendry Street						
	Address		_				
Fort My	rers, FL 33901						
	City/State and Zip Cod	e					
согр@s	sposenhomes.com						
E-	mail address: (to be used for future	annual report noti	fication)				
For furt	her information concerning this mat	ter, please call:					
Charle	es B. Capps, Esq.	239 at (334-2195				
	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:							
	■ \$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.	Na	me of the limited liability company: Diversified Land H	loldin	ıgs	of SWFL L	LC
2	(a)	1900 Wade Drive		(b	1900 Wa	de Drive
	(4)	Principal office address of limited liability company: (Nots: MUST BE STREET ADDRESS)	_	(0	,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Cape Coral, FL 33991	-		Cape Con	al, FL 33991
		9/4/2019	_		L19000224	168
3.		Date of filing/registration in Florida	4.	-		Document number
5.	(a)	GERAGHTY, DOUGHERTY & STOCKMAN, P.A.				
-	(-)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State			CAN SEP 19	
		·	· · · · · · · · · · · · · · · · · · ·			
		1531 HENDRY ST				<u>-</u>
		FORT MYERS.	33901	l		
(b)		PLF REGISTERED AGENT, L.L.C. Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u>	Office	ado	<u>fress</u> :	- 1. 1. 2. 3v
		NEW Registered Office Address:				-
		1833 HENDRY STREET				_
		FORT MYERS , FL	33901	i		_
ch: age wa	ange ent w s/we	mited liability company is not organized under the laws or changes are made, the Florida street address of the result be identical. Or, in the case of a Florida limited liab re authorized by are offirmative vote of the members of cless of organization or the operating agreement of the li	egist oility the l	ere cor limi d li	d office an mpany, it i ited liabilit	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in apany.
_ 5	ignat	ure of a member or authorized representative of a member	-			Printed or typed name of signee
no.	iijiea	of accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a charge in the registered office address, I he in writing of the change.	e to a erfor for in ereby	act ma n C i co	in this cap nce of my hapter 603 nfirm that	