

Help

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.

. Na	me of the limited liability company: South (Citrus Mach	nine LLČ	
2. (a)	10226 SOUTH SAND CREEK TERRACE	(b) P.O	. BOX 10364	
. (Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	INVERNESS, FL 34452	BRC	DOKSVILLE, FL 34603	
	11/19/19	L190	00287561	
	Date of filing/registration in Florida		Document number	
. (a)	LANKFORD LAW FIRM, PA			
. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:			
	140 SOUTH BEACH STREET			
	Registered Office Address (MUST BE FLORIDA STRE	ered Office Address (MUST BE FLORIDA STREET ADDRESS)		
	SUITE 310			
	DAYTONA BEACH	, FL_32114		
(h)	Registered Agents Inc.			
. ,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regist</u>	tered Office address:	3	
	7901 4th St N			
	NEW Registered Office Address			
	STE 300			
	St. Petersburg	. FL_33702		

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.

Rilun Tark. Signature of a member or authorized representative of a member

Riley Park

Printed or typed name of signee

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.

Bill Havre - Assistant Secretary

Signature of Registered Agent

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