Division of Corporations



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Division of Corporations

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From:

Account Name : LEGALINC CORPORATE SERVICES INC.

Account Number : I20180000011 Phone : (844)386-0178 Fax Number : (214)317-4754

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## LLC REGISTERED AGENT CHANGE GREEN MEADOWS HOLDINGS LLC

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SEP 20 2027

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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.

I. Na	ame of the limited liability company:	rs Holding ———	LLC		
2. (a)			(b)		
	Principal office address of limited liability company.			_	s of limited liability company (IBE POST OFFICE BOX)
	( <u>Note: MUST BE STREET ADDRESS</u> ) 10310 NW 10TH ST.		10310 NW	/ 10TH ST.	BET OST OFFICE DOLY
	10310 NW 10111 St.				
	MIAMI, FL 33172		MIAMI, F	L 33172	
	12/13/2019		L19000298	774	
3.	Date of filing/registration in Florida	-4.		Document r	number
5. (a)					
J. (-)	Registered Agent and Registered Office shown on the records	of the Flori	da Dept of Stat	tc	
	Javier Alberto Vazquez			_	
	Registered Office Address MUST BE FLORIDA STREE	TADDRE.	2.8)		
	10310 nw 10 street				<b>2</b>
	miami	33172			AP 1022 SEP 111 CRE1
	,	rL		_	<u>新</u> 密 ぞ
(b)					20 743
107	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registe</u>	red Office	address	_	PH 60
	LEGALINC CORPORATE SERVICES INC.				(2) <b>(3)</b> (2) (3)
	NEW Registered Office Address.				
	476 Riverside Ave,			<del></del>	
	Jacksonville	FL 32202		1	
change agent was/w the art Signa I here provise the obtomer	dimited liability company is not organized under the corchanges are made, the Florida street address of will be identical. Or, in the case of a Florida limited erre authorized by an affirmative vote of the member icles of organization or the operating agreement of the ature of a member or authorized representative of a member error of a member at a registered agent and completely accept the appointment as registered agent and completely reflect a change in the registered office address, and in writing of this change.	the registed liability of the limited A	red office an company, it is mited liability for dam Mermelst	nd the busine is hereby con ty company o inpany.  tein  Printed or typ  practive I furti	ss office of the registered ifirmed that the change(s) or as otherwise provided in  ped name of signee there agree to comply with the

**Division of Corporations**• P.O. Box 6327

• Tallahassee, FL 32314

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