## L20000620326

(1	Requestor's Name)				
(,	(Address)				
	(Address)				
(0	City/State/Zip/Phone #)				
PICK-UP	WAIT MAIL				
	Business Entity Name)				
(i	Document Number)				
Certified Copies	Certificates of Status				
Special Instructions to F	ıling Officer.				
<u></u>					

Office Use Only



900433206979

2024 JUL 24 PH 12: 55





CSC - Tallahassee CSC 1201 Hays Street Tallahassee, FL 32301-2607 850-558-1500, Ext:

To: Department Of State, Division Of Corporations From: Amanda Miller - Amanda.Miller@cscglobal.com

Ext:

Date: 07/23/24 Order #: 1555484-1

Re: LAGO VERDE MINE, LLC Processing Method: Routine

## TO WHOM IT MAY CONCERN:

Enclosed please find:

closed please find:
Change of Registered Agent and Office
Check in the amount of: \$25.00 - FL State Account Number 120000000195

Please take the following action:

File on a routine basis Issue proof of filing Return evidence to the following: ATTN: Amanda Miller c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

## 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:	MINE, LI	LC		
2. (a)	6107 US Highway 41		(b) 16107 US Highway 41		
- (-)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)	
	Spring Hill, FL 34610		Spring H	Aill, FL 34610	
	01/13/2020		L200000	20326	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	Glover, James M				
/· (=/	Registered Agent and Registered Office shown on the records of 16107 US Highway 41	of the Florid	a Dept. of Sta	ate:	
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES.	<u>2)</u>		
	Spring Hill , F	34610 L		2024 JUL 24	
(b)					
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	ed Office ad	ldress:	PH 2:	
	Corporation Service Company			- 12 S <b>S</b>	
	NEW Registered Office Address:				
	1201 Hays Street			_	
	Tallahassee F	L 32301			
change igent v was/wo he arti	imited liability company is not organized under the last or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited learn authorized by an affirmative vote of the members cles of organization or the operating agreement of the Chris Gaskill	e registere iability co of the lim e limited l	ed office ar ompany, it i nited liabili liability cor	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in	
Signat	ure of a member or authorized representative of a member		_	Printed or typed name of signee	
rovisi he obli o mere	by accept the appointment as registered agent and agens of all statutes relative to the proper and complete igations of my position as registered agent as provide ty reflect a change in the registered office address, I in writing of this change	ree to act 2 perform ed for in C hereby co	in this cap ance of my Chapter 60, onfirm that	pacity. I further agree to comply with the duties, and I am Jamiliar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been	
Sionanu	re of Registered Agent				

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