1_20000027392

(F	Requestor's Name)			
(Address)				
(Address)				
((City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of S	Status		
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115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: 120000000088

Date:	01/04/2022			
Name:	Merritt Walker	_		
Reference #	1554734	<u> </u>		
Entity Name	CHILEN	CHILENO LOT 307, LLC		
	es of Incorporation/Authorization			
☐ Amen	dment			
✓ Change of Agent				
Reinstatement				
Conve	ersion			
☐ Merger				
☐ Dissolution/Withdrawal				
Fictition	ous Name			
Other				
Authorized A	mount: \$25			
Signature:	m			

F: 800.944.6607

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: CHILENO L	_OT 307, LL	LC
(a)		(b)	
,,,,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	No Change		No Change
	January 17, 2020		L20000027392
	Date of filing/registration in Florida		Document number
(a)	Corporation Service Company		
(41)	Registered Agent and Registered Office shown on the records of	Tthe Florida Dep	t, of State:
	1201 Hays Street		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	
	Tallahassee, Fi	32301-25	25
h)	COGENCY GLOBAL INC.		
,	Enter name of NEW Registered Agent and/or NEW Registered	d Office address	
	115 North Calhoun St., Suite 4		AM 9: 33
	NEW Registered Office Address:		
	Tallahassee	32301	
tha it w we	mited liability company is not organized under the la nge or changes are made, the Florida street address o fill be identical. Or, in the case of a Florida limited li- re authorized by an affirmative vote of the members cles of organization or the operating agreement of the	ws of the Stat f the registere iability compa of the limited	d office and the business office of the registe my, it is hereby confirmed that the change(s) liability company or as otherwise provided i
effr	ey Mark Drazan	Jeffr	rey Mark Drazan
11131	ure of a member or authorized representative of a member		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.

/s/Tim Mayville

Signature of Registered Agent