

L20000037971

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

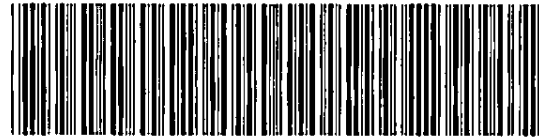
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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STATE PRINTING
TALLAHASSEE, FLORIDA

2025 FEB - 7 PM 12: 23

FILED

2025 FEB - 7 AM 11: 54



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: I20000000088
If there are any issues
please contact Cheyanne at
850-202-1882

Date: 02/07/2025

Name: Ovidshel Ocean Jr.

Reference #: 2652356

Entity Name: ACRUVA COMMUNITY DEVELOPERS, LLC

- Articles of Incorporation/Authorization to Transact Business
- Amendment
- Change of Agent
- Reinstatement
- Conversion
- Merger
- Dissolution/Withdrawal
- Fictitious Name
- Other _____

Authorized Amount: \$25.00

Signature: *J. Ocean Jr.*

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. Name of the limited liability company: ACRUVA COMMUNITY DEVELOPERS, LLC

2. (a) _____ (b) _____
 Principal office address of limited liability company: Mailing address of limited liability company:
 (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

No Change No Change

3. February 7, 2020 4. L20000037971
 Date of filing/registration in Florida Document number

5. (a) HAMLIN, CURTIS D, ESQ
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
2033 MAIN STREET, SUITE 600
 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

SARASOTA, FL 34237

(b) COGENCY GLOBAL INC.
 Enter name of NEW Registered Agent and/or NEW Registered Office address:
115 North Calhoun St., Suite 4
NEW Registered Office Address:

Tallahassee, FL 32301

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 TALLAHASSEE, FLORIDA
 DEPARTMENT OF STATE

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.

/s/ Daniel F. Acosta
 Signature of a member or authorized representative of a member

Daniel F. Acosta
 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

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