(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
्लकोed Copies Certificates of Status					
medial Instructions to Filing Officer:					

Office Use Only



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100 10 2022

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	:	I20000000	195			
	REFERENCE	:	981774	8257994			
	AUTHORIZATION	:	Lane	Seleno	3		
	COST LIMIT	:	\$ 25.00	, all sala			
			- <b></b>	<del></del>			
ORDER DATE : S	September 30, 20	22					
ORDER TIME :	9:36 AM						
ORDER NO. : 9	981774-010						
CUSTOMER NO:	8257994						
			<b>.</b>				
	CHANGE OF A	<u>GEN'</u>	<u>r</u>				
NAME:	CANE CREEK PR	OPE	RTIES LLC				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							
CERTIFIED COPY XX PLAIN STAMPED COPY							
CONTACT PERSON:	: Alexxis Weila	nd ·	EXT#				
			EXAMINER:				

## 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.

N	ame of the limited liability company: CANE CREEK				
(a)	Principal office address of limited liability company:	(	b)	Mailing address of limited liability company:	
	(Note: MUST BE STREET ADDRESS)			(Note: MAY BE POST OFFICE BOX)	
	9239 NW 115th Ave		9239 N\	W 115th Ave	
		_			
	Ocala, FL 34482		Ocara, r	FL 34482	
	04/09/2020		L2000009	99949	
	Date of filing/registration in Florida	 4.		Document number	
(a)	Kim Pogue				
(4,	Registered Agent and Registered Office shown on the records of	the Flori	la Dept, of St	late:	
	9239 NW 115th Ave		_,···		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	<u>21</u>		
	Ocala	34482			
	, F1			<del></del>	
/1				2	
(b)	Enter name of NEW Registered Agent and/or NEW Registerer			2022 <b>H</b> OV	
			<del></del> -		
	Corporation Service Company				
	NEW Registered Office Address:				
	1201 Hays Street				
	Tallahassee	32301			
iange jent v as/we	Tallahassee	ws of the registerability confither his limited	ed office a ompany, it nited liabil liability co	Florida, it is hereby confirmed that a and the business office of the registe t is hereby confirmed that the changility company or as otherwise provid	
Signa	ignature of a member counthorized representative of a member			Printed or typed name of signee	
ovisi e obl Heji	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete instantions of my position as registered agent as provided verteet a change in the registered office address. It is writing of this change, a	perforn	ance of my	y duties, and I am familiar with and acco	