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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FISHER, TOUSEY, LEAS & BALL

Account Number : 119990000021 Phone : (904)356-2600 Fax Number : (904)355-0233

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: armstrong.john@comcast.net

LLC REGISTERED AGENT CHANGE ARMSTRONG CAPITAL INVESTMENTS, LLC

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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.

1. No	me of the limited liability company:ARMSTRONC	GAPITA	TAL INVESTMENTS, LLC
2. (a)	2968 MARSH ELDER DRIVE SOUTH	(b)	2968 MARSH ELDER DRIVE SOUTH
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0).	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	JACKSONVILLE, FLORIDA 32226		JACKSONVILLE, FLORIDA 32226
	5/11/2020	_	1.20000123954
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	FISHER, TOUSEY, LEAS & BALL, P.A.		
	Registered Agent and Registered Office shown on the records of the Registered Office Address (MUST BE FLORIDA STREET A SOLITIVERSIDE AVENUE, SUITE 600)		<u> </u>
		32202	
(b)	JOHN ARMSTRONG		dress: 27.07.2
(0)	Enter name of NEW Registered Agent and/or NEW Registered	dress:	
	129 MUIRFIELD DRIVE		12
	NEW Registered Office Address:		
	PONTE VEDRA BEACH FL.	32082	2
change agent v was/we the arti	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of the operating agreement of the John Armstrong	registered bility com f the limit limited lia	ed office and the business office of the registered impany, it is hereby confirmed that the change(s) ited liability company or as otherwise provided in iability company. JOHN ARMSTRONG
_	ture of a member of authorized representative of a member		Printed or typed name of signee
provisi the obl to mer notifie	by accept the appointment as registered agent and agree ions of all statutes relative to the proper and complete plactions of my position as registered agent as provided elycellect a change in the registered office address. In din writing of this change. John Armstong - opportune 4.	verforman	ance of my duties, and I am tamiliar with and accent.
Signatu	re of Registered Agent		