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COVER LETTER

TO: Registration Section

INHS18 (2/14)

Division of Corporations				
SUBJECT: THE GLYNN FAMILY CONDO, LLC Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to the fo	ollowing:			
MICHAEL J. GLYNN Name of Person	_			
THE GLYNN FAMILY CONDO, LLC Firm/Company	_			
2787 FEULNER PL. Address	_			
THE VILLAGES, FLORIDA 32163-5511 City/State and Zip Code				
MJG 81350 @ AOL. COM E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
MICHAEL J. GLYNN at (716 Name of Person) 982-4231 Area Code & Daytime Telephone Number			
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Enclosed is a check for the following amount:				
\$25 Filing Fee \$55	5 Filing Fee & Certified Copy			

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	Name of the limited liability company: THE GLYNN	FAMILY CONDO LLC
2 (a)	A) 3060 N. ATLANTIC AVE. (b)	2787 FEULNER PL.
2. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	APT. 307	THE VILLAGES
	COCOA BEACH, FLORIDA 32931	FLORIDA, 32163-5511
	June 16 2020 Date of filing/registration in Florida 4.	L 20000 166 367
3.	Date of filing/registration in Florida 4.	Document number
5. (a)	a) MICHAEL J. GLYNN Registered Agent and Registered Office shown on the records of the Florida	D. C.
		Dept. of State:
	3060 N. ATLANTIC AVE.	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
	APT. 307	
	<u> (6004 ВЕАСН</u> , FL <u>329</u>	2020 DEC 21 PN 3: 53
		TIS U
(b)	o)	
	Enter name of NEW Registered Agent and/or NEW Registered Office add	<u>ress</u> :
	NEW Registered Office Address:	
	2787 FEULNER PL.	
	THE VILLAGES .FL 3216	3-55//
change agent v was/w	e limited liability company is not organized under the laws of the lige or changes are made, the Florida street address of the registered will be identical. Or, in the case of a Florida limited liability converse authorized by an affirmative vote of the members of the limitaticles of organization or the operating agreement of the limited limited.	d office and the business office of the registered npany, it is hereby confirmed that the change(s) ted liability company or as otherwise provided in
n	Michael O. Silvani	ICHAEL J. GLYNN
Signa	mature of a member or authorized representative of a member	ICHAEL J. GLYNN Printed or typed name of signee
пощие	reby accept the appointment as registered agent and agree to act issions of all statutes relative to the proper and complete performa obligations of my position as registered agent as provided for in Cerely reflect a change in the registered office address, I hereby coiled in writing of this change.	in this capacity. I further agree to comply with the nce of my duties, and I am familiar with and accept hapter 605, F.S. Or, if this document is being filed nfirm that the limited liability company has been
Signatu	Lichael O. Glynn ature of Registered Agent	