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	Doing so will	generate another cover sheet.	2025 SE TAL
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	Account Name : COM	MPUTERSHARE	[S. 23
	Account Number : 110	9432003053	5 5
	Phone : (56	61)694-8107	ු කුල <b>ය</b>
	Fax Number : (56	61)214-8442	

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

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## LLC REGISTERED AGENT CHANGE HOVNANIAN INSURANCE AGENCY, LLC

Certificate of Status	0
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Page Count	02
Estimated Charge	\$25.00

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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.

. (a)	701 E 5th St		(b) 701	E 5th St		
. ()	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		(4)	Mailing address	of limited liability company.  BE POST OFFICE BOX)	
	Austin, TX 78701		Aus	tin, TX 78701		
	08/07/2020		1.2000	(x)238925		
. (a)	Date of filing/registration in Florida CORPORATION SERVICE COMPANY	4.		Document no	ımber	
- (4)	Registered Agent and Registered Office shown on the records 1201 HAYS STREET	of the Flo	rida Dept.	of State:		
	Registered Office Address (MUST BE FLORIDA STRE	ET ADDR.	ESS)	<del></del>	2025 AUG SECKE	
	TALLAHASSEE	FL_3230	1-2525		AUG 12	
(b)	Corporate Creations Network Inc.			<del></del> .	AUG 12 PH 2: 43 CKEYASSER! FLORID	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	red Office	<u>address</u> .		2:1	
	801 US Highway I				⊕. <b>1</b> 5	
	NEW Registered Office Address:			· <del></del>		
	North Palm Beach		₹			
hange gent v vas/we	imited liability company is not organized under the or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited at the case of organization or the operating agreement of the operating agreem	laws of the regist Hiability rs of the	he State ered offi compan imited li	ice and the business y, it is hereby confi ability company or	office of the registered freed that the change(s)	
	atrella Tavarez ture of a member or authorized representative of a member	. H	strella Ta	ivarez, Attorney-in-F		
	use of a mambar or authorized representative of a member		Printed or typed name of signee			

Signature of Registered Agony

itrella Tavarez Estrella Tavarez, Special Secretary