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(Requestor's Name)		
(Address)	20035524	
(Address)		
(City/State/Zip/Phone #)	11/19/2001011-	
(Business Entity Name)		
(Document Number)	e	
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COVER LETTER

TO: Registration Section Division of Corporations	•				
GARDNER ROAD ESTATE LLC SUBJECT:					
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 m	natter to the following:				
Sarah N. Adler					
Name of Person					
GARDNER ROAD ESTATE LLC					
Firm/Company					
3905 Tampa Rd., #1651					
Address					
Oldsmar, FL 34677					
City/State and Zip Code					
relda70@gmail.com					
E-mail address: (to be used for future annual	report notification)				
For further information concerning this matter, ple	ase call:				
Sarah N. Adler	727 667-0193 at ()				
Name of Person	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 am	ount:				
■ \$25 Filing Fee	☐ \$55 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.

1. Na	une of the limited liability company:GARDNER ROA	D EST	ATE LLC		
2. (a)	600 Cleveland St., Suite 375		(b) P. O. Box 1651		
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	· · · · · · · · · · · · · · · · · · ·	Mailing address of limited liability company: (Nate: MAY BE POST OFFICE BOX)	
	Clearwater, FL 33755		Oldsma	r, FL 34677	
	August 28, 2020		L200002	68233	
3	Date of filing/registration in Florida	- 4.		Document number	
5. (a)	ADLER, JASON				
(a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 600 Cleveland St. Suite 375			State:	
	Registered Office Address (MUST BE FLORIDA STREET)	<u>ADDRE</u>	5.5)	·	
	Clearwater, FL	33755			
(b)	Sarah N. Adler, as Trustee of the Sarah N. Adler Revocable	e Trust	u a/d 9-5-20	— YON 19	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office:	iddress:		
	3905 Tampa Road, #1651			2 .	
	NEW Registered Office Address:	_		2:1,9	
	Oldsmar F1	34677			
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 will be identical. Or, in the case of a Florida limited liacre authorized by an affirmative vote of the members of cless of organization or the operating agreement of the ture of a member or authorized representative of a member	registe ability of the li- limited	red office company, i mited liab	and the business office of the registered t is hereby confirmed that the change(s) ility company or as otherwise provided in ompany.	
I herei provisi the obl to mere	by accept the appointment as registered agent and agrious of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. It is a writing of this change.	perfori	nance of n	apacity. I further agree to comply with the w duties, and I am familiar with and accept	

Division of Corporations • P.O. Box 6327 • Tallahassee, Fl. 32314 F1LING FEE: \$25.00

INHS18 (2/14)

Signature of Registered Agent