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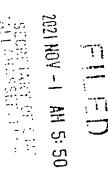
(Requestor's Name)						
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## COVER LETTER

TO:	Registration Section Division of Corporations		•
SUBJE	LAKE COUNTY HOME BUILDERS LL	С	
		Limited Liab	pility Company
Dear Sir	or Madam:		
The encl	losed Registered Agent/Registered Office Cl	hange and fe	c(s) are submitted for filing.
Please re	eturn all correspondence concerning this mat	iter to the fol	lowing:
JOSEPH	HOFFER		
	Name of Person		-
LAKE C	OUNTY HOME BUILDERS LLC		
	Firm/Company	-	•
525 WES	ST PLANT ST		
	Address		•
WINTER	GARDEN, FL 34787		
	City/State and Zip Code		
JOE@CY	NERGREEN.COM		
E-r	nail address: (to be used for future annual re	port notifica	ition)
For furth	er information concerning this matter, pleas	e call:	
JOSEPH	HÖFFERat	407	5588166
	Name of Person	1	Area Code & Daytime Telephone Number
<b>!</b> I !	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Fallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
I	Enclosed is a check for the following amou	int:	
Į.	■ \$25 Filing Fee	<b>\$55</b> 1	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. N	ame of the limited liability company:	LAKE COUNTY F	ЮМ	ЕВ	UILDERS	LLC				
2. (a)	525 WEST PLANT ST			(b)	525 WES	ST PLANT ST				
( )	Principal office address of limited li (Note: MUST RE STREET A		-	(0,		Mailing address of			•	
	WINTER GARDEN, FL 34787	<u> </u>	_		WINTER	ER GARDEN, FL 34787				
			<u>-</u> -			.,,				
	9/21/2020			Ι	.20000294	063				
<ul><li>3.</li><li>5. (a)</li></ul>	Date of filing/registration in JOSEPH HOFFER	Florida	4.	_		Document num	nber		_	
5. (a)	Registered Agent and Registered Office show	wn on the records of the	e Flori	ida l	Dept. of Stat	te:				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				_					
(b) ,	WINTER GARDEN	, FL_3-	4787			_	~1	2		
	JOSEPH HOFFER					_	SECRE ALL A	2021 NOV -	- ["i	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:					設立	- A	es received to		
	#285, 18981 US HWY 441					AM I				
	NEW Registered Office Address:					-		H 5: 50	J	
	MOUNT DORA	, FL <sup>32</sup>	2757			_				
change agent w was/we the arti	imited liability company is not organized or changes are made, the Florida strevill be identical. Or, in the case of a Force authorized by an affirmative vote of cles of organization or the operating a	et address of the re lorida limited liabi of the members of t greement of the lin	giste lity c he lii nited	red om nite lia	office and pany, it is ed liability	d the business of shereby confirm y company or as apany.	ffice of the r ned that the c otherwise p	egister :hange	ed (s)	
U	ure of a member or authorized representative of				.1 *	Printed or typed na	-		. h. a.l	
provision the oblit to mere notified :	ov accept the appointment as registere ons of all statutes relative to the proper gations of my position as registered a ly reflect a change in the registered of in writing of this change.	d agent and agree or and complete per gent as provided fo ffice address, I her	to ac rforn or in eby c	t ir ian Ch conj	this capa ce of my a apter 605, firm that t	icity. I further a luties, and I am . F.S. Or, if this he limited liabil.	igree to com familiar with document is lity company	ply with and a speing has be	th the accept gfiled een	
	e of Registered Agent									