

L20 000 396 323

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

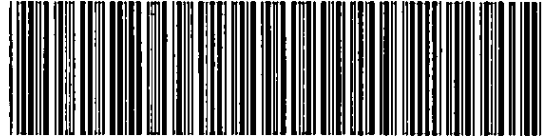
(Business Entity Name)

(Document Number)

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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. Name of the limited liability company: 552 MICCOSUKEE, LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

(Note: **MAY BE POST OFFICE BOX**)

1857 Beach Avenue

1857 Beach Avenue

Atlantic Beach, FL 32233

Atlantic Beach, FL 32233

12/18/2020

L20000396323

3. Date of filing/registration in Florida

4. Document number

5. (a) _____

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Miller, Jason

Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**

12856 BAY PLANTATION DRIVE

Jacksonville, FL 32223

(b) _____

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

Jason Miller

NEW Registered Office Address:

1857 Beach Avenue

Atlantic Beach, FL 32233

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Jason Miller
Signature of a member or authorized representative of a member

Jason Miller, Manager

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of the change.

Jason Miller
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00