## LZI 0000 20169

(Requestor's Name)								
(Address)								
(Address)								
(City/State/Zip/Phone #)								
PICK-UP WAIT MAIL								
(Business Entity Name)								
(Document Number)								
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## **COVER LETTER**

TO:	Registration Section Division of Corporations									
SUBJI	Green Rubicon Florida LLC									
	Name of Limited Liability Company									
Dear S	ir or Madam:									
The en	closed Registered Agent/Registered Off	ice Change and fe	e(s) are submitted for filing.							
Please	return all correspondence concerning th	is matter to the fol	llowing:							
Cynthia	a Davies									
	Name of Person		-							
Cindy's	s Florida LLC									
	Firm/Company		-							
8051 N	. Tamiami Trail STE E6									
	Address		-							
Sarasot	a, Florida, 34243									
	City/State and Zip Code		-							
reports	@cloudpeaklaw.com									
Е	-mail address: (to be used for future ann	ual report notifica	tion)							
For fur	ther information concerning this matter,	please cail:								
Cynthia	a Davies	727 at (	300-0042							
	Name of Person		Area Code & Daytime Telephone Number							
	Mailing Address:		Street Address:							
	Registration Section Division of Corporations		Registration Section Division of Corporations							
	P.O. Box 6327		The Centre of Tallahassee							
	Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810							
	Tananassee, FE 32311		Tallahassee, FL 32303							
	Enclosed is a check for the following	amount:								
	■ \$25 Filing Fee									

INHS18 (2/14)

## 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	ame of the limited liability company:  Green Rubicon I	Florida L	.LC					<u> </u>
2. (a)	8051 N. Tamiami Trail STE E6		8051 N. Tamiami Trail STE E6					
Σ. (ω)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	<del></del>	(0)		Mailing address of lin		-	•
	Sarasota, Florida, 34243			Sarasota, F	Florida, 34243			
	01/07/2021		I	.210000207	769			
3. 5. (a)	Date of filing/registration in Florida REGISTERED AGENTS INC.	4.			Document number	er		
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 7901 4TH ST N STE 300  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				- c: -			
	ST. PETERSBURG	33702			-	; *	MAY	
(b)	Cindy's Florida LLC  Enter name of NEW Registered Agent and/or NEW Registere	ed Office	ndd	ress:	-	ć	AY 3: AM	3 3 18 1 18 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	8051 N. Tamiami Trail STE E6  NEW Registered Office Address:				-	- 1 1		J
	Sarasota , F	L_34243			-			
change agent v was/we	imited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e registe iability of of the li	red con mit	office and pany, it is ed liability	d the business offi s hereby confirme y company or as o	ice of the	ne regist he chan	ered ge(s)
Cynthia Davies Cynthia Davies, Manager								
I here provisi the obl to mero notified	ture of a member or authorized representative of a member by accept the appointment as registered agent and agens on sof all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address, I din writing of this change.  **The Daviss** The Office Registered Agent**	gree to a e perfori ed for in hereby	ct i nar Ch con	n this capa ice of my a capter 605 firm that t	Printed or typed nan acity. I further ag duties, and I am fo , F.S. Or, if this a the limited liabilit	ree to d	omply s	vith th <b>e</b> d accept ng file <b>d</b> been