## L21000731810

Office Use Only



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## COVER LETTER ...

ΓO: Registration Section Division of Corporations						
Palmisano Trust LLC						
Name of Limited Liability Company						
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Offi	ice Change and fee(s) are submitted for filing.					
Please return all correspondence concerning this	is matter to the following:					
Alicia L. Taylor						
Name of Person						
Quarles & Brady LLP						
Firm/Company	<del></del>					
1395 Panther Lane Suite 300						
Address						
Naples, Florida 34109						
City/State and Zip Code	<del></del>					
alicia.taylor@quarles.com						
E-mail address: (to be used for future ann	nual report notification)					
For further information concerning this matter,	, please call:					
Alicia L. Taylor	239 659-5038 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	; amount:					
■ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy					

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.

l. Na	me of the limited liability company: Palmisano Trust	LLC		<u></u>
		(	b)	
2. (4)	Principal office address of limited liability company: ( <u>Note: MUST BE STREET ADDRESS</u> )		7 ==	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	1141 Treasure Cay Court		1141 Tres	asure Cay Court
	Punta Gorda, FL 33950		Punta Go	rda, Fl., 33950
	May 18, 2021		L21000231	810
3.	Date of filing/registration in Florida	— 4.		Document number
E (a)				
5. (a)	Registered Agent and Registered Office shown on the records of Thomas S. Palmisano	of the Flori	ia Dept. of Su	nte:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  1141 Treasury Cay Court		2021 AUG - 9	
	Punta Gorda	33950		
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u> Thomas S. Palmisano	ed Office :	ddress:	TLED  S-9 AM 9: 54  ANSSEE, FL
	NEW Registered Office Address:			<del></del>
	1141 Treasure Cay Court			<del></del>
	Punta Gorda	FL_33950		
change agent was/w the art Signs  I here provis the obto notifie	limited liability company is not organized under the le or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of the authorized representative of a member of the appointment as registered agent and a lions of all statutes relative to the proper and completely reflect a change in the registered agent as proving in the registered office address.	he registe Tiability of s of the line the limited Pa	red office a company, it mited liabil l liability co nomas S. Pa almisano Int	is hereby confirmed that the change(s) ity company or as otherwise provided in oppony.  In this area of the Thomas S.  Itervivos Trust, member of the LLC  Printed or typed name of signee