

L21 000260255

Florida Department of State
Division of Corporations
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LLC REGISTERED AGENT CHANGE
NORTHRUP FAMILY ENTERPRISES, LLC

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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: Northrup Family Enterprises, LLC

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
16 Turnbull Hill Court
St. Augustine, Florida 32092

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
16 Turnbull Hill Court
St. Augustine, Florida 32092

3. June 3, 2021 Date of filing/registration in Florida
 4. 1.21000260255 Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Fisher, Tousey, Leas & Ball, P.A.
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
501 Riverside Avenue, Suite 600
Jacksonville, FL 32202

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
Ryan L. Northrup
NEW Registered Office Address
16 Turnbull Hill Court
St. Augustine, FL 32092

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 operating agreement of the limited liability company.

Notarized by: Ryan L. Northrup Ryan L. Northrup
 Signature of authorized representative of a member 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 change the registered office address, I hereby confirm that the limited liability company has been changed.

Notarized by: Ryan L. Northrup
 Signature of Registered Agent

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

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