Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

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LLC REGISTERED AGENT CHANGE FL - LANCASTER RE HOLDINGS LLC

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Help

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.

Floride	ĘI - I Δ	NCASTE	R RE HOLDING	SLLC		
	nne of the limited liability company: 1		(b) 41 STATE STREET			
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	5W	U	UNIT A			
	BAL HARBOUR, FL 33154		ANECK, NJ 07666			
	06/16/2021	L2	1000279089			
3.	Date of filing/registration in Florida	4.	Document number			
<i>5</i> ()	BERGER, HERMAN					
5. (a)	Registered Agent and Registered Office shown on the records	of the Florida Dep	t. of State:			
	9801 COLLINS AVE			91		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			SEC ///SI		
	APT 5W					
				ECRETARY ISION OF C		
	BAL HARBOUR	FL 33154		100 COL X C		
(b)	Registered Agents Inc.			ORPORATIONS		
(6)	Enter name of NEW Registered Agent and/or NEW Registered Office address:		:	28 H		
	7901 4th St N			XS		
	NEW Registered Office Address:		•			
	STE 300					
	St. Petersburg	FL_33702				
the change of th	limited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limite ere authorized by an affirmative vote of the membe icles of organization or the operating agreement of	s of the register d liability comp ers of the limited	any, it is hereby confirmed that I liability company or as other	re the change(s)		
	Ribus Park.	Riley F	Park			
Signa	ature of a member 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 merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Bill Havre - Assistant Secretary