Florida Department of State

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000408065 3)))



H230004080653ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

_ ()												
**Enter the	email	address	for	this	busines	5.5	entity	to	be	used	for	future
				F - 4	1				-	4500		Tutuit
_ 📜 🛅 annua l	repor	t maitin	gs.	tnter	only o	ne	emaıt	add	res:	s ple	ase.	**

Email Address:

LLC REGISTERED AGENT CHANGE GOSHEN + CORNERSTONE LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

NOV 3 0 2023 K. Brumbley

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. N	ame of the limited liability company: GOSHEN + CO	RNERSTON	NE LLC							
2. (a)	27453 CASHFORD CIR, SUITE 101		(b) 27453 CASHFORD CIR, SUITE 101							
	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)							
	WESLEY CHAPEL, FL 33544		WESLEY CHAPEL, FL 33544							
	11/02/2021		.210004747	722						
3.	Date of filing/registration in Florida	 4		Document number						
5. (a)	FLORIDA REGISTERED AGENT LLC									
` '	Registered Agent and Registered Office shown on the records of 7901 4TH ST N STE 300 Registered Office Address (MUST BE FLORIDA STREET)		Dept. of State	- e: -						
	ST. PETERSBURG , FI	L 33702		20.						
(b)	RIKIYA N. THOMAS			2023 NOV 29						
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	1 Office addr	.612 :	29						
	101 E. KENNEDY BLVD,			. P						
	NEW Registered Office Address:			- - -						
	SUITE 3700			. ⊕						
	TAMPA	33602		_						
agent w was/we the artic	or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liaster authorized by an affirmative vote of the members of cles of organization or the operating agreement of the ure of a member or authorized representative of a member	registered ability com- of the limited limited liab	office and pany, it is ed liability pility comp rd Burke	I the business office of the registered thereby confirmed that the change(s) company or as otherwise provided in						
I hereb provision the oblit to mere	by accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ily reflect a change in the registered office address, I h I in writing of this change	ee to act in performand d for in Cha hereby conf	this name	raits. I fourth an usu sa ta saunth with the						

Signature of Registered Agent