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| (Requestor's Name) | | | | | | |
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| | | | | | | |
| (City/State/Zip/Phone #) | | | | | | |
| PICK-UP WAIT MAIL | | | | | | |
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| (Business Entity Name) | | | | | | |
| | | | | | | |
| (Document Number) | | | | | | |
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| Certified Copies Certificates of Status | | | | | | |
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| Special Instructions to Filing Officer: | | | | | | |
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Office Use Only



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MAR 0 4 2012 ; ALBRITTON CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE

AUTHORIZATION

COST LIMIT : \$ 25.00

ORDER DATE: March 3, 2022

ORDER TIME : 2:15 PM

ORDER NO. : 525963-005

CUSTOMER NO: 8176882

CHANGE OF AGENT

NAME:

AG-PRO REAL ESTATE INVESTMENTS

III, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XXX PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER:

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:AG-PRO REA | AL ESTAT | Έ | INVESTMEN | NTS III, LLC |
|-----------------------------------|--|---|--------------------------|--|---|
| | | | | | |
| ` , | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | <u> </u> | -, | Ma | illing address of limited liability company: (Note: MAY BE POST OFFICE BOX) |
| | 19595 U.S. HWY 84 E | | | P.O. BOX 9 | 5 BOSTON, GA 31626 |
| | BOSTON, GA 31626 | | | | |
| | 02/23/2022 | | l | .220000753 | 63 |
| 3. | Date of filing/registration in Florida | 4. | _ | D | ocument number |
| 5. (a) | | | | | |
| J. (a) | Registered Agent and Registered Office shown on the records of | of the Florid | la 1 | Dept. of State: | |
| | GROOVER, JAMES M, JR | | | | |
| | Registered Office Address (MUST BE FLORIDA STREE | TADDRES | <u>(S)</u> | | |
| | 16130 DUCK AWAY RD | | | | & 2 |
| | TALLAHASSEE | 32309 | | | 2022 HAR |
| | | | | | A |
| (b) | | | | | HAS -3 |
| | Enter name of NEW Registered Agent and/or NEW Registered Office address: | | | <u>ess</u> : | R-3 AM TARY OF AHASSE |
| | Corporation Service Company | | | | MHII:06 |
| | NEW Registered Office Address: | | | | — بنز م |
| | 1201 Hays Street | | | | |
| | Tallahassee . F | L 32301 | | | |
| change agent was/we the art | limited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the | ne register liability co of the lin | ed om nite | office and the pany, it is he ad liability c | he business office of the registered ereby confirmed that the change(s) company or as otherwise provided in |
| | mes M. Groover Jr. | Jan —— | ne | s M. Groove | |
| _ | iture of a member or authorized representative of a member | | | | rinted or typed name of signee |
| provisi the obl to mer | hy accept the appointment as registered agent and as ions of all statutes relative to the proper and complet ligations of my position as registered agent as provid ely reflect a change in the registered office address, l d'in writing of this change. | gree to act e perform led for in (l hereby co | t ir van Ch onj | this capaci ce of my dut apter 605, F firm that the | ty. I further agree to comply with the les, and I am familiar with and accept S. Or, if this document is being filed limited liability company has been |
| | inge tokyble | | | | |
| Signatu | ire of Registered Agent | | | | |