LZZ 000 163 65S

(Requestor's Name)				
(Address)				
(Address)				
(City/St	ate/Zip/Phone #)			
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of	Status		
Special Instructions to Filing Officer:				





000403501260

COVER LETTER

	on Section of Corporations			
_{SUBJECT:} Tre	ee Crest, LLC			
	Nan	ne of Limited L	liability Company	
Dear Sir or Madai	n:			
The enclosed Reg	istered Agent/Registered Off	ice Change and	I fee(s) are submitted for filing	.
Please return all c	orrespondence concerning th	is matter to the	following:	
	Name of Person			
Tree Crest,	LLC			
	Firm/Company			,
3523 Via Be	eltran			7.2.2
	Address			
San Diego, (CA 92117			
	City/State and Zip Code			
	r@gmail.com			i c
E-mail addre	ess: (to be used for future and	nual report noti	fication)	
For further inform	nation concerning this matter.	please call:		
Steven Lave	r	_{at (} 206	₎ 588-6115	
N	ame of Person		Area Code & Daytime Tele	phone Number
Registrati Division o Clifton B 2661 Exe	/COURIER ADDRESS: on Section of Corporations uilding cutive Center Circle ee, Florida 32301	Re Di P.	AILING ADDRESS: egistration Section ivision of Corporations O. Box 6327 allahassee, Florida 32314	
Enclosed	is a check for the following	(атоині:		
Д \$25 Fil	ling Fee	□ \$.55 Filing Fee & Certified Cop	y

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

1 107 101	4.			
I. Na	une of the limited liability company: Tree Cre	șt, LLC	· · · · · · · · · · · · · · · · · · ·	
2. (a)	3111 Tree Crest Court (b) 3523 \		3523 Via Beltran	
` ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability (Note: MAY BE POST OFFI	
	Estero, FL 34135		San Diego, CA 92117	
	4/18/2022	 	_22000163655	
3.	Date of filing/registration in Florida	— _{4.} –	Document number	
5 (a)	Wetzel, Greogory W			
5. (a)	Registered Agent and Registered Office shown on the records	of the Florida D	Dept. of State:	
	2210 Vanderbilt Bch Rd			
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)		T 5-7
	STE 1201			t.
	Naples	_{FL} 34109		
(b)	Registered Agents Inc			F .
\ /	Enter name of NEW Registered Agent and/or NEW Register	ed Office addr	ress:	
	7901 4th St N		74.	S. C.
	NEW Registered Office Address:			
	STE 300			
	St. Petersburg	_{FL} 33702		
the cha agent v was/we	imited 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 limited are authorized by an affirmative vote of the member cles of organization or the operating agreement of the street of the	of the registe liability comes of the limit he limited lia	ered office and the business office of npany, it is hereby confirmed that the ed liability company or as otherwise ability company.	the registered change(s)
_//	74	Siev	ren Laver	

Signature of a member or 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.

David Roberts - Assistant Secretary

Signature of Registered Agent