Division of Corporations Elorida Department of Scate fornora ito rot fic Filing Cover Sheet

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Division of Corporations Fax Number : (850)617-6383

From:

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Account Number	:	I 2009000081	
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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 LLL PROPERTIES LLC Certificate of Status 0 Certified Copy 0 Page Count 02 \$25.00 Estimated Charge

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY 1.

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.

Na	me of the limited liability company:						
(a)	Principal office address of limited liability company: (<i>Note: MUST BE STREET ADDRESS</i>)	()N	tailing address of limit (<u>Note: MAY BE PQ</u>	ted liabilit	ty comp	any:
	04/20/22		L2200018775				
	Date of filing/registration in Florida	4.		Document number	r		
(a)	MARTIN, LENELL M		D				
	Registered Agent and Registered Office shown on the records of 224 SUNSET POINT DR	the Florid	a Dept. of State	:			
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES.	<u>S)</u>				
	ORMOND BEACH FI	32174					
(b)	Northwest Registered Agent LLC				··· •	2023 NOA - 5	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	l Office ac	dress:		:. -	NON	
	7901 4th St N						
	NEW Registered Office Address:					AH	Ú
	STE 300					AM 11: 33	
	St. Petersburg, Fl	33702				မာ	

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 articles of organization or the operating agreement of the limited liability company.

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•	•			

Nat Smith

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. 11----

Taylor Newman - Assistant Secretary

Signature of Registered Agent

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