

(Requestor's Name)						
(Address)						
(Address)						
(Cit	y/State/Zip/Phone	#)				
PICK-UP	☐ WAIT	MAIL				
(Bu	siness Entity Nam	e)				
(Document Number)						
Certified Copies	_ Certificates	of Status				
Special Instructions to Filing Officer:						





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2024 FEB - 2 PM 4: 09

GUARDIAN LEGAL

Guardian Legal 12600 World Plaza, Suite 63 Fort Myers, FL 33907 239-530-4300

January 29, 2024

VIA Certified Mail

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

To whom it may concern:

On behalf of Magna Homes Services LLC, please find enclosed the Registered Agent/Registered Office Change and fees submitted for filing.

Guardian Legal
Leffrey Shott
Administrative Assistant



INHS18 (2/14)

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: MAGNA HOMES SERVICES LLC	
Name of Li	mited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Cha	nge and fee(s) are submitted for filing.
Please return all correspondence concerning this matte	r to the following:
JAIME CALLE LOZANO	
Name of Person	
MAGNA HOMES SERVICES LLC	
Firm/Company	
1017 SE 12TH AVENUE	
Address	
CAPE CORAL, FL 33990	
City/State and Zip Code	
permitting@magnahomebuilders.com	
E-mail address: (to be used for future annual repo	ort notification)
For further information concerning this matter, please	call:
at (_	239 541-8416
Name of Person	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amoun	nt:
☐ \$25 Filing Fee	S55 Filing Fee & Certified Copy

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.

I. N	lame of the limited liability company; MAGNA HOM	IES SERV	ICES LLC				
2. (a)	D. 1. 1. 27 11 20 11 12 12	(h)				
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		,	Mailing address (Note: MAY	of limited	liability	company.
	1017 SE 12th AVE		1017 SE 1	2th AVE			
	CAPE CORAL, FL 33990		CAPE CO	RAL, FL 3399	0		
	04/21/2022		L220001897	737			
3.	Date of filing/registration in Florida	4.		Document nu	ımber		
5. (a))						
(,	Registered Agent and Registered Office shown on the records of	of the Florid	a Dept, of Stan	– e:			
	G&R BOOKKEEPING SERVICES LLC						
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRES	<u></u>	-			
	4403 SE 16TH PL STE 3						
	CAPE CORAL	33904 FL		_			
				_	;o	35	
(b)				_	<u> </u>	2024 FEB	
	Enter name of NEW Registered Agent and/or NEW Register	ed Office a	<u>ldress</u> :		6	83	
	GUARDIAN LEGAL				が表	-2	
	NEW Registered Office Address:	-		_	38E 30F	PH	
	12600 WORLD PLAZA LN STE 63				TO TO	÷	
	FORT MYERS	L_33907	-	-	AIE	9	
				-			
agent was/w	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 leter authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e register iability co of the lin	ed office and ompany, it is sited liability	the business hereby confi company or	office o	f the re	gistered
	OCEN	JAI	ME A. CALL	E LOZANO			
	ture of a member or authorized representative of a member			Printed or typed		-	
the ahl	hy accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as providely reflect a change in the registered office address, I d in writing of the change. Julian K. Julia	pee to act e perform ed for in (hereby co	in this capa ance of my d Chapter 605, onfirm that to	wity. I furthes luties, and I a F.S. Or, if the he limited liat	r agree t m familio us docur bility cor	o comp ar with nent is npany .	oly with the and accept being filed has been

Signature of Registered Agent