L22000309569



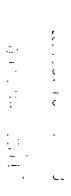
(Requestor's Name)									
(Address)									
(Address)									
(City/State/Zip/Phone #)									
PICK-UP WAIT MAIL									
(Business Entity Name)									
(Document Number)									
Certified Copies Certificates of Status									
Special Instructions to Filing Officer.									
:									

Office Use Only



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10/10/24--01013--001 **25.00



COVER LETTER

TO:		stration Section ion of Corporations		•					
SUBJE	ECT:	Freestone Group 4 LLC							
	Name of Limited Liability Company								
Dear S	Sir or M	ladam:							
The en	iclosed	Registered Agent/Registered Office Chan	ge and fee	e(s) are submitted for filing.					
Please	return	all correspondence concerning this matter	to the fol	lowing:					
Mari	ia McK	Keehan		<u>.</u>					
		Name of Person							
Frees	tone M	lanagement LLC		_					
		Firm/Company							
5415	Napa			-					
		Address							
Saras	sota, Fl	. 34243		_					
		City/State and Zip Code							
frees	tonem	gmt@gmail.com nddress: (to be used for future annual repo	et natifica	- 1ion)					
		formation concerning this matter, please c							
Mari	ia Mek	Kechan	> 1 1	, 726-0898					
	ia vici	Name of Person at (Area Code & Daytime Telephone Number					
	Mail	ing Address:		Street Address:					
		stration Section		Registration Section					
Division of Corporations				Division of Corporations					
P.O. Box 6327				The Centre of Tallahassee					
		shassee, FL 32314	2415 N. Monroe Street, Suite 810						
				Tallahassee, FL 32303					
	Enclo	osed is a check for the following amount	:						
	S \$2	5 Filing Fee	□ \$55	855 Filing Fee & Certified Copy					

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 Florida.

1.	Na	me of the limited liability company: Freestone (Group 4	LLC						
2	(a)	_5415 Napa Driye, Sarasota, FL 34243	(b) 5415 Napa Drive, Sarasota, FL 34243							
	(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)						
		7/12/2022			L2200030	09569				
3.		Date of filing/registration in Florida	4.		Docume	ent number				
_	(a)	Maria K. McKeehan								
5.	(a)	Registered Agent and Registered Office shown on the records o	of the Florie	La Dent, of	State:					
		2170 Main Street Suite 103		•						
		Registered Office Address	r ann pe							
		registered vince Address - MOST BLT LORIZA STREET	CADDRE.	227		ί.	t c			
										
		Sarasota	i. 342	37						
						10-480 ST				
	(b)	Freestone Management LLC				ξ.				
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ed Office a	ddress:		e e	:			
							_			
		Freestone Management LLC				-	; C-			
		NEW Registered Office Address:								
		5415 Napa Drive								
			-							
		Sarasota p	ղ 3424	13						
		, P	1. <u> </u>	ner .						
cha ago wa	inge ent v s/we	imited liability company is not organized under the later or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited later authorized by an affirmative vote of the members cles of organization of the pregrating agreement of the	e registe liability c of the li	red office ompany, nited liab	e and the bus it is hereby bility compar	siness office confirmed t	of the regist that the chang	ered ge(s)		
		relland Alched	N	aria Mc	Keehan, Al	MBR				
Signature of a member or authorized representative of a member				Printed or typed name of signee						
pro the to t	visi obl nere	by accept the appointment as registered agent and accept ons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address. It is writing of this change.	gree to ac e perforn ed for in t hereby c	t in this c iance of i Chapter confirm th	capacity. 1 f my duries, ar 605, F.S. () hat the limite	further agre nd Lam fam r, if this doo ed liability o	e to comply viliar with an cument is bei company has	with the d accept ing filed been		
Sig	natu	re of Registered Agent								