Florida Department of State 253 Division of Corporations Electronic Filing Cover Sheet

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LLC DECISTEDED AGENT CHANGE

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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. No	ame of the limited liability company: Keamey Landsca	ре Ма	nage	ment and S	Services LLC			
2. (a)	4704 nw 35th st		(b)	4704 nw	35th st			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	 -	(0)		Mailing address (Note: MAY		-	
	Gainesville, FL 32605	_		Gainesvill	le, FL 32605			
	1/3/2023 12:00:00 AM		L	.23000006	283			
3.	Date of filing/registration in Florida	4.	_		Document no	umber		
5. (a)	LEGALINC CORPORATE SERVICES INC.							
	Registered Agent and Registered Office shown on the records of	the Flo	riđa I	Dept. of Stat	te:			
	476 Riverside Ave.							
	Registered Office Address (MUST BE FLORIDA STREET A	IDDR.	ESS)		- -			
	Jacksonville, FL	3220:	2		_	• -	2021	
(0)	Corporate Creations Network Inc.		• • • • • • • • • • • • • • • • • • • •		_	;	2024 JAH 16	<u>.</u>
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office	add	ress:		•	9 1	三温度
	801 US Highway 1				_		P	372
	NEW Registered Office Address:				_		1: 35	
					_		()	
	North Palm Beach , FL	33408	3		_			
change agent v was/wo	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	regist bility f the i	ered com limit	office an pany, it is ed liabilit	d the business s hereby confi y company or	s office of irmed that	f the regi t the cha	stered nge(s)
	Kristen Espinales	K	Criste	n Espinale	es, Attorney-in-	Fact		
Signal	ture of a member or authorized representative of a member		_		Printed or type	d name of s	ignee	
provision the obli to mere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ly reflect a change in the registered office address. I h I in writing of this change.	perfor	man	ce of my a	duties, ånd I a	ım Tamilic	ir with a	nd accent
	Kristen Espinales Kristen Espinales, Special Secretary							

Signature of Registered Agent