Florida Department of State Distrion of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000160703 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPUTERSHARE Account Number: 110432003053 : (561)694-8107 er : (561)214-8442 Phone Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	
-------	----------	--

LLC REGISTERED AGENT CHANGE FIVE STAR ESTATES LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Help

Electronic Filing Menu Corporate Filing Menu

HAY 0 2 2024

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.

(a)	6909 REDBAY DR		(b) 6909 RE	EDBAY DR	
(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)	Mailing address of limited (Note: MAY BE POST	
	BROOKSVILLE, FL 34602		BROOK	SVILLE, FL 34602	
	05/02/2024		L2300016	6371	
	Date of filing/registration in Florida	4.		Document number	
(a)	LEGALINC CORPORATE SERVICES INC.				
	Registered Agent and Registered Office shown on the record	of the Flor	ida Dept, of St	ate:	
	476 RIVERSIDE AVE.				
	Registered Office Address (MUST BE FLORIDA STRE	32202			
(b)		FL 32202			2021
(b)	Registered Office Address (MUST BE FLORIDA STRE	FL 32202			. A SH 1202
(b)	Registered Office Address (MUST BE FLORIDA STRE	FL 32202			202411117 -2
(b)	Registered Office Address (MUST BE FLORIDA STRE JACKSONVILLE Corporate Creations Network Inc. Enter name of NEW Registered Agent and/or NEW Registered	FL 32202			2024115.Y -2 PH 4:47

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.

Estrella Tavarez, Attorney-in-Fact
Signature of a member or authorized representative of a member

Estrella Tavarez, Attorney-in-Fact

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.

Signature of Registered Ageny

Signature of Registered Ageny