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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803 Fax Number : (855)330-1010

\*\*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 PATTON PROPERTY INVESTMENT GROUP, LLC

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T. LEMIEUX

JUN - 8 2023

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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.	Na	me of the limited liability company:  PATTON PROPER	TY INVES	STMENT GR	OUP, LLC		1	
2. (	(a)		(b)				•	
	,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			imited liabili POST OFF		•	
		05/24/23	_	2300025560	01			
3.		Date of filing/registration in Florida	4.		Document num	ber		
5.	(2)	BAKER, KYLE N, MGR						
.).	(4)	Registered Agent and Registered Office shown on the records of the	Dept. of State:	:				
		421 PINTA PLACE						
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)						
						<i>ਚ</i> ੁੰ,	202	
		LONGWOOD FL	32750				2923 7	
(	(b)	Northwest Registered Agent LLC						: - :
	,	Enter name of NEW Registered Agent and/or NEW Registered Office address:						ς-
		7901 4th St N				- •	2: 30	
		NEW Registered Office Address:				-		
		STE 300						
		St. Petersburg , FL	33702					
the age was	cha nt w /we	mited liability company is not organized under the law nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law for the second street and the second street and the second se	the registe bility con f the limit	ered office npany, it is ed liability ibility com	and the busines hereby confirm company or as	ss office of red that the	f the regi e change	stered (s)
Si	gnat	ure of a member or authorized representative of a member			Printed or typed no	ame of signe	c	
pro the to n	visio obli rere	oy accept the appointment as registered agent and agreems of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address, I have been also change in writing of this change.  Taylor Newman - Assistant Se	performar I for in Ch ereby con	n this capa ice of my d iapter 605, ifirm that ti	city. I further c laties, and I am F.S. Or, if this he limited liabil	igree to co familiar w documen lity compa	omply wi vith and c t is being ny has b	th the accept g filed een
		rayior recomment - Applicant det	or creary					

Signature of Registered Agent