L23000257510

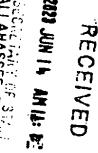
(Re	equestor's Name)	,
(Ad	ddress)	
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PICK-UP	☐ WAIT	MAIL
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CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT	NO.	:	120000000195

REFERENCE : 813239 7627517

AUTHORIZATION :

COST LIMIT : \$. 25.00

ORDER DATE: June 13, 2023

ORDER TIME : 9:04 AM

ORDER NO. : 813239-005

CUSTOMER NO: 7627517

CHANGE OF AGENT

NAME: WEST RIVER VILLAGE DEVELOPMENT, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland-sorenson -- EXT#

EXAMINER:

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: WEST RIVER VII	LLAG	EC	EVELOPM	MENT, LLC
2. ((a)	3534 FRUITVILLE RD.		(b)	P.O. BOX	51297
~ . ,	·••/ .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(0)	• •	dailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		SARASOTA, FL 34237	_		SARASOT	TA, FL 34232
		05/25/2023		_	L23000257	7510
3.5.	(a)	Date of filing/registration in Florida ICARD MERRILL	4.		l	Document number
٥.	(,	Registered Agent and Registered Office shown on the records of th	e Flor	ida I	Dept. of State	:
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				~
		2033 MAIN STREET, SUITE 600				
		SARASOTA FL_3	34237	7		BURNING PM 3
('b) _.	Enter name of NEW Registered Agent and/or NEW Registered O Corporation Service Company NEW Registered Office Address:				2023 JUNI 14 PM 3: 00 WHAT PARY OF STATE WHAT PARY SEE, FL
		1201 Hays Street				
		Tallahassee, FL_3	32301	1		
char ager was	nge nt w /we	mited liability company is not organized under the laws or changes are made, the Florida street address of the retill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	egiste ility the li	ered com imit	office and pany, it is ed liability	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
		/ Eric Bell	Ε.	ric E		IORIZED PERSON
I he pro the to n noth	ereb visio obli gere Ge	we of a member or authorized representative of a member by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pagations of my position as registered agent as provided by reflect a change in the registered office address, I he fin writing of this change. Grave of Registered Agent	erfori for in rehy	man Ch con	n this capa ice of my d apter 605, firm that th	Printed or typed name of signee city. I further agree to comply with the uties, and I am jamiliar with and accept F.S. Or. if this document is being filed he limited liability company has been Vice President

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00