

L23 000 295 504

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

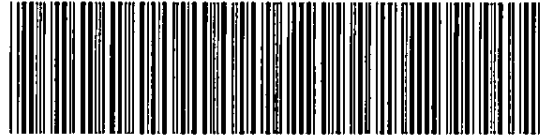
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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FILED
2024 APR 18 PM 2:18
RECEIVED
2024 APR 18 AM 11:15
SECRETARY OF STATE
TALLAHASSEE, FL
TALLAHASSEE, FLORIDA



CSC - Tallahassee
1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext:

To: Department Of State, Division Of Corporations
From: Amanda Miller - Amanda.Miller@cscglobal.com
Ext:
Date: 04/18/24
Order #: 1487532-8
Re: 3340 SE 17 PLACE, LLC
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Change of Registered Agent and Office
I20000000195

Cost Limit: 25.00

AUTH: *[Signature]*

Please take the following action:

File on a routine basis

Issue proof of filing

Return evidence to the following:

ATTN: Amanda Miller

c/o Corporation Service Company

251 Little Falls Drive

Wilmington, DE 19808

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

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SECRETARY OF STATE
TALLAHASSEE, FL

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. Name of the limited liability company: 3340 SE 17 PLACE, LLC

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

4705 LELAND DRIVE CUMMING, GA 30041

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

4705 LELAND DRIVE CUMMING, GA 30041

06/19/2023

L23000295504

3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

GIUNTA, PATRICK B, ESQ

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

351 SOUTH CYPRESS ROAD SUITE 310

POMPANO BEACH, FL 33060

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

Corporation Service Company

NEW Registered Office Address:

1201 Hays Street

Tallahassee, FL 32301

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SECRETARY OF STATE
TALLAHASSEE, FL

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.

/s/ Gordon Linder

Signature of a member or authorized representative of a member

Gordon Linder

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]
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00

CSC COA-4235