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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Phone : (813)436-5206 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:		
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LLC REGISTERED AGENT CHANGE **LAND GROUP 5317-5319 LLC**

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K. SALY

OC+ 19 2023

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)		_ (b))	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		:	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		-		
	09/12/23	- -	L230004286	515
	Date of filing/registration in Florida	4.		Document number
a)	GLOVER, TOM			
	Registered Agent and Registered Office shown on the records of th 7901 41H STREET NORTH	e Florida	Dept. of State	e:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			من المناسبة
	SUITE 300			
	SAINT PETERSBURG 3	33702		THE THE T
				-
1)	Northwest Registered Agent LLC			15
,	Enter name of NEW Registered Agent and/or NEW Registered C	Office add	ress:	T 1 1 1 2 3 1 1 1 2 3 1 1 1 1 1 1 1 1 1 1
	7901 4th St N			-
	NEW Registered Office Address:			-
	STE 300			_
	St. Petersburg	3702		
	FL_			-
ha t w we rtic	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the fill 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	he regist pility con the limi	tered office inpany, it is ted liability	e and the business office of the register is hereby confirmed that the change(s) y company or as otherwise provided in
<u> </u>	we of a member or authorized representative of a member	Nat S	imith	
				Printed or typed name of signee
rek isio bli	y accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p gations of my position as registered agent as provided by reflect a change in the registered office address. I he	e to act erforma för in C ercby co	in this cape nce of my c hapter 605 nfirm that	acity. I further agree to comply with the duties, and I am familiar with and acce i, F.S. Or, if this document is being file the limited liability company has been
tica	'in writing of this change.			