

L24000157939

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

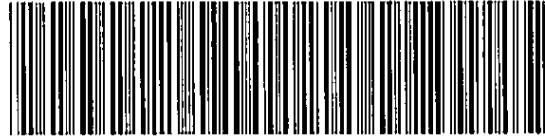
(Document Number)

Certified Copies _____

Certificates of Status _____

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000434692530

FILE
AUG 14 PM 8:52
FL

FILED
08/14/24

RECEIVED
AUG 14 PM 2:10
CLERK OF COURT
JUDICIAL CIRCUIT IN AND FOR
THE NINTH JUDICIAL CIRCUIT
TALLAHASSEE, FLORIDA

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

DATE 08/14/2024

****WALK IN****

ENTITY NAME 755 94th Naples, LLC

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXXXXXXXXX

Plain Copy

Certified Copy

Certificate of Status

STATE
OF
FLORIDA
AUG 14 2024
AM 8:52

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certificate of Good Standing

****APOSTILLE / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$25

ACCOUNT #: I20160000072

S. R. F/M

Please call Tina at the above number for any issues or concerns. Thank you so much!

**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: 755 94th Naples, LLC

2. (a) Principal office address of limited liability company:
*(Note: **MUST BE STREET ADDRESS**)*
755 94TH AVE N
NAPLES, FL 34108

(b) Mailing address of limited liability company:
*(Note: **MAY BE POST OFFICE BOX**)*
4151 CHAIN BRIDGE RD
FAIRFAX, VA 22030

04/02/2024 L24000157939

3. Date of filing/registration in Florida 4. Document number

5. (a) C T Corporation System
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
1200 South Pine Island Road

Registered Office Address *(**MUST BE FLORIDA STREET ADDRESS**)*

Plantation, FL 33324

(b) Registered Agents Inc

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

7901 4th St N, STE 300

NEW Registered Office Address:

St. Petersburg, FL 33702

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/ Waseem Garbia
Signature of a member or authorized representative of a member

Waseem Garbia
Printed or typed name of signer

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.

/s/ David Roberts
Signature of Registered Agent