(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Rusiness Entity Name)					
(Business Entity Name)					
(Document Number)					
(Bocument Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
UORNE					
J. Ho 2025					
J. HORNE MAR 28 2025					

Office Use Only



500444562135

2025 HAR 27 ANTH: 08 FILED

2025 HAR 27 PM 3: 29

THOMINED

CSC - Tallahassee CSC 1201 Hays Street

Tallahassee, FL 32301-2607 850-558-1500, Ext: x62969

To: Department Of State, Division Of Corporations From: Amanda Miller - Amanda.Miller@cscglobal.com

Ext: x62969 Date: 03/27/25

Order #: 1896343-12

Re: TIERRA VERDE MANAGERS LLC

Processing Method: Routine

## TO WHOM IT MAY CONCERN:

Enclosed please find:

Change of Registered Agent and Office

Check in the amount of: \$25.00 - FL State Account Number: I20000000195

action of the same

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.

## 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. N	Same of the limited liability company:	)E MANA	AGERS LLC	; 
2. (a)	Principal office address of limited liability company:		(b)	Mailing address of limited liability company:
	(Note: MUST BE STREET ADDRESS)			(Note: MAY BE POST OFFICE BOX)
	2151 CENTRAL AVENUE		2151 CE	ENTRAL AVENUE
	ST PETERSBURG, FL 33713		ST PET	ERSBURG, FL 33713
	12/11/2024		L240005	14417
3.	Date of filing/registration in Florida	4.		Document number
5. (a				
(",	Registered Agent and Registered Office shown on the records o MADDOX, JOSEPH E	f the Flori	da Dept, of Sta	ate:
	Registered Office Address (MUST BE FLORIDA STREET	FADDRE:	<u>SS)</u>	<del></del> -
	2151 CENTRAL AVENUE			ج
	ST PETERSBURG, F	L_33713		2025 N. S. 27 AM II: 08
				· · · · · · · · · · · · · · · · · · ·
(b)				
	Enter name of NEW Registered Agent and/or NEW Registere	d Office a	<u>iddress</u> :	工工 二
	Corporation Service Company			·
	NEW Registered Office Address:			. 8
	1201 Hays Street			_
	Tallahassee, F	L_32301		<del></del>
chang agent was/v	limited liability company is not organized under the lage or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited I were authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	e registe iability o of the li	red office a company, it mited liabil	nd the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in
/S/ Thomas Gaffney		Th	Thomas Gaffney, Member	
Sign	nature of a member or authorized representative of a member			Printed or typed name of signee
provi. the ol to me	eby accept the appointment as registered agent and ag sions of all statutes relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address, I ed in writing of this change.	rec to ac e perform ed for in hereby	ct in this cap nance of my Chapter 60 confirm tha	pacity. I further agree to comply with the duties, and I am familiar with and accept 15, F.S. Or, if this document is being filed the limited liability company has been
Signat	ture of Registered Agent			
Grace	E. Kirby, Asst. Vice President			

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

INHS18 (2/14)