Antoniou troobiles of Requester's Name 2541 Sugar Train Address City/State/Zip Phone #	200945 Plorida, cic 945
	Office Use Only
CORPORATION NAME(S) & DOCUM	MENT NUMBER(S), (if known):
1. 199-945	
(Corporation Name) 2(Corporation Name)	(Document #) 700040157879 -04/18/0101089011 ******25.00 ******25.00
(Corporation Name)	(Document #)
3(Corporation Name)	(Document #)
4(Corporation Name)	(Document #)
☐ Walk in ☐ Pick up time ☐ Mail out ☐ Will wait	☐ Photocopy ☐ Certified Copy ☐ Certificate of Status
NEW FILINGS	AMENDMENTS
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger Amendment Approximation of R.A., Officer/Director Ap
OTHER FILINGS Annual Report Fictitious Name	REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other

Examiner's Initials

CR2E031(7/97)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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. The name of the limited liability company is: ANTONIOU PROPERTIES OF FLORE
2. The mailing address of the limited liability company is:
2541 SKIPPER TRAIL CLEARWATER, FL 33761-1117
4-16-2001 <u>L9900000945</u>
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
THOMAS S, ANTONIOU Name
2110 PINNACLE CIR, NORTH Address
PALM HARBOR, FL 34684-1767 City, State and Zip
6. The name and address of the new registered agent and/or office:
Name 2541 SKIPPER TRAIL Florida street address (P.O. Box NOT acceptable)
CLEARWATER FL 33761-1117
City, State and Zip
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. Signature of a member or authorized representative of a member)
Signature of a member or authorized representative of a member)
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 608, 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 of Registered Agent)