

Division of Corporations

L99000009263

Page 1 of 1

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000097396 3)))



H150000973963ABC7

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : BUSINESS FILINGS
Account Number : 105256001620
Phone : (608) 827-5300
Fax Number : (608) 827-3501

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: agent@bizfilings.com

LLC REGISTERED AGENT CHANGE
VICTORY GARDEN CAPITAL LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

RECEIVED
15 APR 21 AM 10:00
BUREAU OF COMMERCIAL
INFORMATION SERVICES

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 APR 21 AM 10:44

Electronic Filing Menu

Corporate Filing Menu

Help

204/22

2002 P. 002

Fax Audit: H150000973963

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

Pursuant to the provisions of sections 605.0114, 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: Victory Garden Capital LLC
2. (a) Principal office address of limited liability company: 6900 Daniels Pkwy., Ste. D20-323
(Note: **MUST BE STREET ADDRESS**) Fort Myers, Florida 33913
- (b) Mailing address of limited liability company: 3245 Peachtree Pky., Suite D-218
(Note: **MAY BE POST OFFICE BOX**) Swanee, Georgia 30024
3. Date of filing/registration in Florida: 12/28/1999
4. Document number: L99000009263
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Registered Agent: MAHAN, RONALD M
Registered Office Address: 12010 NE Hwy 70
Arcadia, FL 34266
- (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
Business Filings Incorporated
515 E. Park Avenue
Tallahassee FL 32301
(Note: **MUST BE FLORIDA STREET ADDRESS**)

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.

Thomas J. Blood
Signature of a member or authorized representative of a member:

Thomas J. Blood, Member
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.

Mark Williams
Signature of Registered Agent

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

FILING FEE: \$25.00

DTH518 (12-13)

2002 P. 002

Fax Audit: H150000973963

608 828 5501

APR-21-2015 13:20

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA