M13000000 560

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

Office Use Only



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Ra Change



CSC - WILMINGTON 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: October 23, 2019

Order#: 021068-010

Re: LANDMARK AT AUTUMN COVE, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

Please take the following action:

XX File in your office on a routine basis.

Issue Proof of Filing.

Attn: Ami Casper

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

OUCA.XCOA

. 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.	Na	me of the limited liability company: LANDMARK AT	AUTUM	IN COVE, L	LLC		
2 (a	1)	4890 W. Kennedy Avenue, Suite 240	(b	o)			
(-,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ ("		Mailing address of limited liab (<u>Note: MAY BE POST OF</u>		
		Tampa, FL 33609	-				
		01/28/2013		M130000	00560		
3.		Date of filing/registration in Florida	4.		Document number		
5 (~).	Joseph G. Lubeck					
5. (a)	Registered Agent and Registered Office shown on the records of the	 le Florida	Dept. of State	– e:		
		4890 W. Kennedy Boulevard, Suite 240		,			
		Registered Office Address (MUST BE FLORIDA STREET A)	_				
Megacite White Millions (May 1 12 The May 1							
					-		
		Tampa .FL_	33609	<u> </u>	_		
(L	. \	Corporation Service Company				76	•
(t	")	Enter name of NEW Registered Agent and/or NEW Registered C	Office add	dress:	-	100 (
						- 4	• .
		1201 Hays Street				57	٠.٠
		NEW Registered Office Address:		 -	-		. 2.
						MHI: 03	¬,
				_	-	<u> </u>	
		Tallabassas				<u> </u>	r
		Tallahassee, FL_	32301		-		
the clagent was/	ha t w we	mited liability company is not organized under the law- nge or changes are made, the Florida street address of taill 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 regis pility co the lim	stered office impany, it is ited liability	e and the business office s hereby confirmed that t y company or as otherwi	of the re the chan	egistered ge(s)
/s/ l	Η.	Herbert Myers	Н. Н	lerbert Mye	rs, Authorized Person &	Vice Pre	esident
Signature of a member or authorized representative of a member					Printed or typed name of sig		
provi the o to me	sie bli re	ny accept the appointment as registered agent and agre 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 in writing of this change	e 10 act erforma for in C ereby ca	in this cape ince of my hapter 605 onfirm that	acity. I further agree to duties, and I am familiar i, F.S. Or, if this docume the limited liability comp	comply with an our is her oany has	with the d accept ing filed s been
Signa	tur	e of Registered Agent Corporation Service Company	BY: A	mi M. Cas	per, Asst. Vice Preside	ent	

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