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1/14/2019



Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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

Email	Address:
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LLC REGISTERED AGENT CHANGE CONECO REALTY, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
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DEC 16 7619

A. LUNT

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Florida.

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

, (a)		(b)	
	Principal office address of limited fiability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	4 FIRST STREET		
	BRIDGEWATER, MA 02324		
	4/29/2015		5000003492
	Date of filing/registration in Florida	4.	Document number
. (a)	R & A AGENTS, INC. Registered Agent and Registered Office shown on the records of the	se Fiorida Dept. (of State:
	Registered Office Address IMUST BE FLORID 4 STREET 4	DDRESSI	
	ATTN: LORI MOORE, ASST. SEC'Y		9
	2320 FIRST STREET SUITE 1000		東朝
	FORT MYERS, FL 33901		
			(S) (S)
(h)	Enter value of NEW Registered Agent and/or NEW Registered (Office address:	The R
	CT Corporation System		9: 55 FLORI
	NEW Registered Office Address:		
	1200 South Pine Island Road		·
	Plantation FL 3	B224	
ne char gent w ras/we ne artic	mited liability company is not organized under the laws nge or changes are made, the Florida street address of till 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 liable of members or authorized representative of a member	he registered of the company the limited list imited l	office and the business office of the registed it is hereby confirmed that the change(s) ability company or as otherwise provided in
hereh rovisio re obli rmere	by accept the appointment as registered agent and agree ons of all statules relative to the proper and complete parations of my position as registered agent as provided by reflect a change in the registered office address. I he is not this change in the registered office address. I he is not this change.	e to act in thi performance of for in Chapte erchy confirm	s capacity. I jurther agree to comply with I my dutles, and I am familiar with and acc ir 605, F.S. Or, if this document is being fi that the limited liability company has been
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