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.

(((H190002115073)))



H190002115073ABC-

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 : C T CORPORATION SYSTEM
 Account Number : FCA0000000023
 Phone : (614)280-3338
 Fax Number : (954)208-0845

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

Email Address:

LLC REGISTERED AGENT CHANGE AMERICAN LANDMARK CAROLINA MANAGEMENT LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$55.00



7-12-19

Electronic Filing Menu

Corporate Filing Menu

Help

<u>...</u>

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

1. N	ame of the limited liability company: AMERICAN LAS	NDMARK CARO	DLINA MANAGEMENT LLC	
z. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(3)	Mailing address of limited hability (Note: MAY BE POST OFFI	
	No change	No ch	ange	
		1,4		
	04/15/2016	M16000	0003148	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	Joseph G Lubeck			
J. (Registered Agent and Registered Office shown on the records of t	the Florida Dept. of	f State:	
	11911 US Highway 1, Suite 204		2.5	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		SECRI TAL	2619 JUL 12
	North Palm Beach , FL		1 1	
(b)	C T Corporation System			TE province
• /	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	m m	
	1300 South Pinc Island Road		P A	ر ت
	NEW Registered Office Address:		•••	
	Suite 250		19-19-19-19	
	Plantation , FL	33324	and the same of th	
the chagent was/v	limited liability company is not organized under the law sange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited his were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	the registered of ability company of the limited lia	office and the business office of	the registered change(s)
		James Mille		
	ature of a mention of authorized representative of a member		Printed or typed name of signer	
I her provi- the ol- to me	cby accept the appointment as registered agent and agr sions of all statutes relative to the proper and complete oligation of my position as registered agent as provide rely refrect a change in the registered office eddress. I	ree to act in this performance of a for in Chapter hereby confirm	s capacity. I further agree to co f my duties, and I am familiar w r 605, F.S. Or, if this document that the limited liability compar	nipry with the ith and accept is heing filed ny has been
notifii By:	ed in Writing of this change. C T Corporation System	~	Alfred Yo	
	use of Registered Agent	_	Assistant S	
	Division of Corporations P.O. I	Box 6327 Tall		•

FILING FEE: \$25.00

TNHS18 (2/14)