Page 2 of 3 11/29/2018 Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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## LLC REGISTERED AGENT CHANGE FIRST COAST LAND AND TIMBER GS 2 LLC

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## 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. Name of the limited liability company: First Coast Land and Timber GS21.LC

(8)			(b)			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of lit (Note: MAY BE 1		
	977 Stagecoach Road		977 Stage	coach Road		
	Oglethorpe, GA 31068		Oglethorp	e, GA 31068		
	01/22/2018		M18000000	)766		
	Date of filing/registration in Florida			Document numb	ær –	
(a)	Registered Agent and Registered Office shown on the records of			-		
	Registered Agent and Registered Office shown on the records of SEFTON JOHN T	f the Flori	ida Dept. of Stat	e:		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE	<u>\$\$)</u>	-	T. m	
	LINDEPENDENT DR STE 3201			~		
	JACKSONVILLE	32202		_	18 HON 30	
					SSE SSE	
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Offices	difest:	-	<u>ି</u> କ୍ <b>ନ</b>	11
	Enter name of the workerster of Agent and of Mary Avenues	<u>a vinse i</u>	<u> 111111159</u> 0		4 8: 55 FLORIDA	Γ.,
	C T Corporation System			_	55 Nic	
	NEW Registered Office Address:					
	1200 South Pine Island Road	· · · · · · · · · · · · · · · · · · ·		_		
	Planuation, Fl	33324	•			

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.

ん ist-easer n ar ∼₫ 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 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. Angel Shearer

By: a TC March System ca	<b>PRAssistant Secretary</b>
Signature of Registered Agent	,

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

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