M190000000834

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(Business Entity Name)						
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O SIMMONS JAN - 2 2020 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000019

REFERENCE : 117049 _ 7819

AUTHORIZATION :

COST LIMIT : \$ **55.** 90

ORDER DATE: December 30, 2019

ORDER TIME : 12:23 PM

ORDER NO. : 117049-005

CUSTOMER NO: 7819772

CHANGE OF AGENT

NAME: HILLSBOROUGH 301, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY

CONTACT PERSON: Kadesha Roberson -- EXT#

EXAMINER:

COVER LETTER

TO: Registration Section Division of Corporations								
Hillsborough 301, LLC - M19000000834								
Name of Limited Liability Company								
Dear Sir or Madam:								
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.								
Please return all correspondence concerning this matter to the following:								
Jennifer Lunt								
Name of Person								
GreenPointe Holdings, LLC								
Firm/Company								
7807 Baymeadows Road East, Suite 205								
Address								
Jacksonville, FL 32256								
City/State and Zip Code								
JLunt@GreenPointeLLC.com								
E-mail address: (to be used for future annual re	port notification)							
For further information concerning this matter, pleas	e call:							
Jennifer Lunt	904 299-6119							
Name of Person	Area Code & Daytime Telephone Number							
STREET/COURIER ADDRESS:	MAILING ADDRESS:							
Registration Section	Registration Section							
Division of Corporations	Division of Corporations							
Clifton Building	P.O. Box 6327							
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301								
Enclosed is a check for the following amount:								
□ \$25 Filing Fee	■ \$55 Filing Fee & Certified Copy							

INHS18 (2/14)

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.

l.	Na	me of the limited liability company: Hillsborough 30	1, LLC			·
2.	(a)	7807 Baymeadows Road East	(b	7807 B	Baymeadows Road I	Fast
	(-,	Principal office address of limited liability company:	_ (0	,	Mailing address of limit	
		(Note: MUST BE STREET ADDRESS)		•	(Note: MAY BE PO.	
		Suite 205	_	Suite 205	5	
		Jacksonville, FL 32256	_	<u>Ja</u> cksonv	ville, FL 32256	
		01/24/2019		M190000	000834	
3.		Date of filing/registration in Florida	- 4.		Document number	<u> </u>
5.	(a)	Corporation Service Company				
	(-)	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of State	- c:	
		1201 Hays Street				
		Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS		-	, ~ <u>·</u>
		THE STATE OF THE PROPERTY OF THE PERSON OF T	1DDKESS)	<u>.</u>		4= 1 2019 DEC
					<u></u>	유 "레
		Tollahassa				ω '***
		Tallahassee, FL	32301		•	·
					r	P
((b)	Donna J. Feldman, Esq.				
		Enter name of NEW Registered Agent and/or NEW Registered	Office add	<u> ress</u> :		3: 19
						TH 49
		Feldman & Mahoney, P.A.			_	
		NEW Registered Office Address:				
		2240 Belair Road, Suite 210			_	
		Clearwater , FL	337641	<u> </u>	_	
the age: was	chai nt w /we	mited liability company is not organized under the law inge or changes are made, the Florida street address of fill be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the regis ibility con f the limi limited li	tered office mpany, it is ted liability	e and the business o s hereby confirmed y company or as oth	ffice of the registered that the change(s)
Si	gnati	ure of a member or authorized representative of a member	Ones	HUSHAN	Printed or typed name	of signer
I he prov the to m noti	ereb visic obli vere fied	y accept the appointment as registered agent and agroups of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address, I have in writing of this change. The office is the proper of the change of the change of the change. The office is the change of the change of the change of the change of the change.	performa I for in C iereby co	in this capa nce of my a hapter 605, nfirm that t Donna J. Fe	acity. I further agre duties, and I am Jan , F.S. Or, if this do the limited liability	aa ta aamudu with tha
		/ V(/				

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