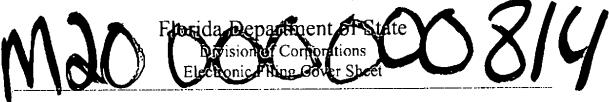
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Division of Corporations



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> LLC REGISTERED AGENT CHANGE FIELD AND EAGLE, LLC

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Page: 3 of 3

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: FIELD AND E						
2. (a)	6702 Stonegate Dr		6702 Stonegate Dr				
	Principal office address of limited limbility company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability communy: (Note: MAY BE POST OFFICE BOX)				
	Naples, Florida 34109	Naples, Florida 34109					
		- ,					
							
	12/30/2019	_	M20000000814				
3.	Date of filing registration in Florida	4.	· Document number				
s. (a)	Compelling Investments						
. (,	Registered Agent and Registered Office shown on the records of t	ne Florida	Dept of State:				
	9617 GÓVERNORS CLUB PL		·				
	Registered Office Address (MUSI BE FLORIDA STREET A	ODRESS)	2				
	BRADENTON FL	34202	2				
			2				
(b)	Business Filings Incorporated	سيسيد ملأسات وو	2007 P				
,	Finer name of NEW Registered Agent and or NEW Registered	Office add	ODZZ HAR				
	1200 South Pine Island Road		Si. — _				
	NEW Registered Office Address:	SET 0 LE					
	Attention of the Addition						
							
	Plantation	33324					
	FL	33324					
the cha agent v was w the art	imited liability company is not organized under the lay ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited ha ere authorized by an affirmative vote of the members of icles of organization of the operating agreement of the	the regis ability co if the lim limited l	stered office and the business office of the registered ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in liability company.				
٠ ،	South Soldk	Br					
	ture of a member or authorized representative of a member		Printed or typed name of signee				
provis the ob to met	thy accept the appointment as registered agent and agr ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. I d in writing of this change.						
14	Mark Williams, AVP, Busine	ss Filings	s Incorporated				
Signah	ue of Registered Agent						
	Distriction of Commonstiones P.O. I	Roy 6177	7. Tullahassee Fl. 32314				

FILING FEE: \$25.00