

M2000 0008809

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

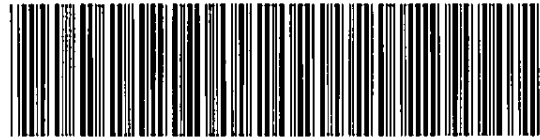
(Document Number)

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Special Instructions to Filing Officer:

J. HORNE  
JUN 25 2025

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SEC. OF STATE  
TALLAHASSEE, FLORIDA

2025 JUN 24 PM 3:27

RECEIVED



CSC - Tallahassee  
1201 Hays Street  
Tallahassee, FL 32301-2607  
850-558-1500, Ext: x62969

To: Department Of State, Division Of Corporations  
From: Amanda Miller - Amanda.Miller@cscglobal.com  
Ext: x62969  
Date: 06/24/25  
Order #: 3299748-40  
Re: THE BLAKE AT ST. JOHNS, LLC  
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Change of Registered Agent and Office

Check in the amount of: \$25.00 - FL State Account Number: I200000000195

Please take the following action:

File on a routine basis

Issue proof of filing

Return evidence to the following:

ATTN: Amanda Miller

c/o Corporation Service Company

251 Little Falls Drive

Wilmington, DE 19808

A handwritten signature in black ink, appearing to read "Amanda Miller", is written over the address information.

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

**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: <u>THE BLAKE AT ST. JOHNS, LLC</u>                                                                                                                                                                                                                 |                                                                                                                                                                               |
| 2. (a) <u>219 EAST GARDEN STREET</u><br>Principal office address of limited liability company:<br><i>(Note: MUST BE STREET ADDRESS)</i><br><u>SUITE 400</u><br><u>PENSACOLA, FL 32502</u>                                                                                                    | (b) <u>219 EAST GARDEN STREET</u><br>Mailing address of limited liability company:<br><i>(Note: MAY BE POST OFFICE BOX)</i><br><u>SUITE 400</u><br><u>PENSACOLA, FL 32502</u> |
| 3. <u>09/23/2020</u><br>Date of filing/registration in Florida                                                                                                                                                                                                                               | 4. <u>M20000008809</u><br>Document number                                                                                                                                     |
| 5. (a) <u>BOLL, R JEFFREY</u><br>Registered Agent and Registered Office shown on the records of the Florida Dept. of State:<br><u>14620 PERDIDO KEY DRIVE</u><br>Registered Office Address <i>(MUST BE FLORIDA STREET ADDRESS)</i><br><u>SUITE 100</u><br><u>PENSACOLA</u> , FL <u>32507</u> |                                                                                                                                                                               |
| (b) <u>Enter name of NEW Registered Agent and/or NEW Registered Office address:</u><br><br><u>Corporation Service Company</u><br><u>NEW Registered Office Address:</u><br><u>1201 Hays Street</u><br><br><u>Tallahassee</u> , FL <u>32301</u>                                                |                                                                                                                                                                               |

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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered 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.

|                                                                                                          |                                                                                          |
|----------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|
| <u>/s/ Christopher Andy Yarborough</u><br>Signature of a member or authorized representative of a member | <u>Christopher Andy Yarborough, Authorized Person</u><br>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.*

|                                                            |                                            |
|------------------------------------------------------------|--------------------------------------------|
| <u>/s/ Grace E. Kirby</u><br>Signature of Registered Agent | <u>Grace E. Kirby, Asst Vice President</u> |
|------------------------------------------------------------|--------------------------------------------|