M20000008809

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _______ Certificates of Status _______

Special Instructions to Filing Officer:

J. HORNE

JUN 25 2025

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TALLAHASSEE FLORIDA

CSC
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: I20000000195

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

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: THE BLAKE AT ST. JOHNS, LLC

2. (a) 219 EAST GARDEN STREET
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
SUITE 400
PENSACOLA, FL 32502

(b) 219 EAST GARDEN STREET
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
SUITE 400
PENSACOLA, FL 32502

3. 09/23/2020
Date of filing/registration in Florida

4. M20000008809
Document number

5. (a) BOLL, R JEFFREY
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
14620 PERDIDO KEY DRIVE
Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*
SUITE 100
PENSACOLA, FL 32507

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(b)
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
Corporation Service Company
NEW Registered Office Address:
1201 Hays Street
Tallahassee, FL 32301

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.

/s/ Christopher Andy Yarborough
Signature of a member or authorized representative of a member

Christopher Andy Yarborough, Authorized Person
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.

/s/ Grace E. Kirby
Signature of Registered Agent

Grace E. Kirby, Asst Vice President

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