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COVER LETTER

Division of Corporations				
Sugar Palm Investments, Llc SUBJECT:				
	imited Liability Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Cha	ange and fee(s) are submitted for filing.			
Please return all correspondence concerning this matte	er to the following:			
SAMANTHA BRINTON				
Name of Person	·			
HARBOR COMPLIANCE				
Firm/Company	 			
1830 Colonial Village Ln				
Address				
Lancaster, PA, 17061				
City/State and Zip Code				
E-mail address: (to be used for future annual rep	ort notification)			
For further information concerning this matter, please	call:			
SAMANTHA BRINTON at (717 8040845			
Name of Person	Area Code & Daytime Telephone Number			
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Enclosed is a check for the following amoun	ıt:			
■ \$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.

1. N	ame of the limited liability company: Sugar Palm Inves	tments,	Lic				
2. (a)	3801 SUGAR PALM DRIVE TAMPA, FL 33619			5555731	ENWOOD HII	LLS PARKWA	Y SE
(,,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)					s of limited liabili <i>BE POST OFF</i> 19512	, , ,
1	03/30/2021		Α.	12100000			
3.	Date of filing/registration in Florida BELL, ROBERT	4.			Document n	umber	
(0)	Registered Agent and Registered Office shown on the records of t	the Florid	da D	ept. of Stat	te:	TÀL	າດ9 ≜
	Registered Office Address <u>(MUST BE FLORIDA STREET A</u> 3801 SUGAR PALM DRIVE	IDDRES	<u> </u>		_	LAHASS	PILED NOW OCT -3 PM 3:57
	tampa, FL_	33619			_	m _c	PR
	Registered Agents Inc Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office a	ddra	288):		TÄLLÄHÄSSEE, FLORIDA) 3: 57
	NEW Registered Office Address: 7901 4th St N Ste 300			<u>.</u>	-		
	St. Petersburg , FL	33702					
change agent v was/we the arti- Signal I herel provisithe oblite motified	imited liability company is not organized under the law or changes are made, the Florida street address of the rivill be identical. Or, in the case of a Florida limited liability authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liability of a member or authorized representative of a member on a complete proper the appointment as registered agent and agree ons of all statutes relative to the proper and complete properties of my position as registered agent as provided by reflect a change in the registered office address, I have a completed to the proper and complete properties of this change.	register bility co the lin imited	ed ompaite	office and pany, it is diability com	d the business hereby configure ompany or apany. Printedor types	s office of the irmed that the as otherwise p	registered change(s) provided in
Signatui	e of Registered Agent						