Florida Department of State

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000169246 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

| Fma | 11 | Address |
|-----|----|---------|

LLC REGISTERED AGENT CHANGE THE 5TH HORSE LAND ASSETS, LLC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | \$25.00 |

Electronic Filing Menu Corporate Filing Menu

Help

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 Note: MUST BE ST | limited liability company: TREET ADDRESS | (h) | Mailing address of limited (Nate: MAY BE POST | - , |
|--|---|-----------------|---|-----------------|
| 08/06/2021 | | | 21000010863 | |
| Date of filing/registr | ration in Florida | 4. | Document number | |
| GELBER, DEREK J | | | | |
| Registered Agent and Registered O | ffice shown on the records of | the Florida Dep | t. of State: | |
| 16540 SW 137TH A | VE APT #1216 | | | |
| Registered Office Address (MU | | | | |
| WIIAWII | MAMI | | | 202 |
| Registered Ager | nts Inc | | | 2023 HAY - 5 |
| Enter name of NEW Registered Agent and/or NEW Registered Office address: | | | ; | `_ < |
| Enter name of NEW Registered A | 7901 4th St N | | | |
| | | | | P |
| 7901 4th St N NEW Registered Office Address: | | | | |
| 7901 4th St N | | | | |

the articles of organization or the operating agreement of the limited liability company.

| Patien yeary | Robin Jones | | |
|--|---------------------------------|--|--|
| Signature of a member or authorized representative of a member | 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.

| David Roberts - Assistant Secretary

David Roberts - Assistant Secretary

Signature of Registered Agent