

M22000013833

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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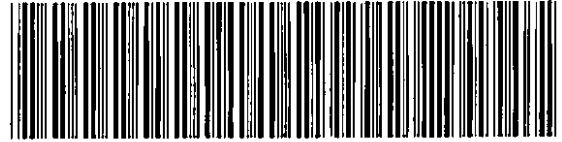
(Business Entity Name)

(Document Number)

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**CT CORP**  
**3458 Lakeshore Drive, Tallahassee, FL 32312**  
**850-656-4724**

**Date:** 03/31/2023

Acc#I20160000072

*en: c DW*

Name:	Evernest Property Management, LLC
Document #:	
Order #:	14837702

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

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	Plain: <input type="checkbox"/>
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Email Address for Annual Report Notifications:

Availability \_\_\_\_\_

Document \_\_\_\_\_

Examiner \_\_\_\_\_

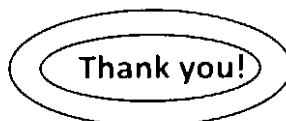
Updater \_\_\_\_\_

Verifier \_\_\_\_\_

W.P. Verifier \_\_\_\_\_

Ref# \_\_\_\_\_

Amount: \$ **55.00**



**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: EVERNEST PROPERTY MANAGEMENT, LLC

2. (a) 1701 OXMOOR RD (b) 1701 OXMOOR RD  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

BIRMINGHAM, AL 35209

BIRMINGHAM, AL 35209

08/29/2022

M22000013833

3. Date of filing/registration in Florida 4. Document number

5. (a) IRIALIZ PEDROZA  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
3802 SWALLOWTAIL LN

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

KISSIMMEE, FL 34744

C T Corporation System

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:

1200 South Pine Island Road

Plantation, FL 33324

2023 MAR 31 AM 9:57

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.

[Signature]  
Signature of a member or authorized representative of a member

[Signature]  
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.

By: SEAN L EMERICK, ASSISTANT SECRETARY  
Signature of Registered Agent

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