
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.

(((H23000178139 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 : BERGER SINGERMAN LLP, FT.LAUDERDALE

Account Number : I20020000154 Phone : (954)712-5119 Fax Number : (954)523-2872

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

Christie@metrodg.com Email Address:

LLC REGISTERED AGENT CHANGE HAWK TUSCANY, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$55.00

Electronic Filing Menu

Corporate Filing Menu

Help

esos e i yan K. Brumble) (((H230001781393)))

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	same of the limited liability company: HAWK TUS	SCANY, LI	C				
2. (a)	2502 NORTH ROCKY POINT DRIVE, SUITE 1050)	(b	2502 NO	RTH ROCKY POINT I	DRIVE, SUI	TE 1050
``	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS) TAMPA, FL 33607	γ: 	(0		Mailing address of limited (Note: MAY BE POST) FL 33607		
3.	February 9, 2023 Date of filing/registration in Florida			M2300000	174! Document number		
5. (a)	C T CODDOD A TION GUETON	٠,			Document number		
J. (a)	Registered Agent and Registered Office shown on the recommon 1200 SOUTH PINE ISLAND ROAD Registered Office Address (MUST BE FLORIDA STREET)				- e: -		
	PLANTATION	, FL_33324	1		.	202:	
(b) .	XYZ REGISTERED AGENT LLC					2023 KAY	
	Enter name of NEW Registered Agent and/or NEW Regist	tered Office	add	rcss:	-	12	=======================================
	2502 NORTH ROCKY POINT DRIVE, SUITE 1050)				। . <u>उ</u> ष्ट	=======================================
	NEW Registered Office Address:					, H	
	ТАМРА	, FL 33607	·				
agent v	imited liability company is not organized under the or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the member cles of organization or the operating agreement of	the registed d liability of rs of the li the limited	com imit	office and pany, it is ed liability bility comp	I the business office on the hereby confirmed that company or as other pany.	of the registe	ered
Signat	/s/ John M. Ryan ture of a member or authorized representative of a member	10)HN	M. RYAN			
I heret provisio the obli to mere notified	by accept the appointment as registered agent and cons of all statutes relative to the proper and compligations of my position as registered agent as providy reflect a change in the registered office address, I in writing of this change. Is John M. Ryan, Manager	agree to a ete perfori ided for in , I hereby	ct in nan Ch conj		Printed or typed name of: city. I further agree t uties, and I am famili F.S. Or, if this docur te limited liability con		ith the accept ig filed been
	e of Registered Agent						