Entity Name: URBAN DEVELOPMENT OF PASCO COUNTY L.L.C.		Secretary of State 7733787552CR	
Current P	rincipal Place of Business:		1133101332CR
2155 GLEN E SAFETY HAF	DR. RBOR, FL 34695-2013		
Current M	ailing Address:		
	2130, STATION "B" D HILL, ONTARIO L4E 1A3 CA		
FEI Number: 59-3703753			Certificate of Status Desired: Yes
Name and	Address of Current Registered Agent:		
ORSI, ANGE 2155 GLEN E SAFETY HAF			
The above nan	ned entity submits this statement for the purpose of changing	its registered office or regis	tered agent, or both, in the State of Florida.
SIGNATU			10/10/00/0
	RE: ANGELA ORSI		12/10/2019
	RE: ANGELA ORSI Electronic Signature of Registered Agent		12/10/2019 Date
	Electronic Signature of Registered Agent		
		Title	
Authorized	Electronic Signature of Registered Agent d Person(s) Detail :	Title Name	Date
Authorize Title	Electronic Signature of Registered Agent d Person(s) Detail : MGRM		Date
<b>Authorize</b> Title Name	Electronic Signature of Registered Agent d Person(s) Detail : MGRM ORSI, ANGELA P. O. BOX 2130, STATION 'B'	Name	Date MGRM ORSI, ANTONIO P. O. BOX 2130, STATION 'B'
Authorize Title Name Address	Electronic Signature of Registered Agent d Person(s) Detail : MGRM ORSI, ANGELA P. O. BOX 2130, STATION 'B'	Name Address	Date MGRM ORSI, ANTONIO P. O. BOX 2130, STATION 'B'
Authorize Title Name Address City-State-Zip	Electronic Signature of Registered Agent d Person(s) Detail : MGRM ORSI, ANGELA P. O. BOX 2130, STATION 'B' D: RICHMOND HILL ONTARIO L4E 1A3	Name Address	Date MGRM ORSI, ANTONIO P. O. BOX 2130, STATION 'B'
Authorize Title Name Address City-State-Zip Title	Electronic Signature of Registered Agent d Person(s) Detail : MGRM ORSI, ANGELA P. O. BOX 2130, STATION 'B' D: RICHMOND HILL ONTARIO L4E 1A3 MGRM	Name Address	Date MGRM ORSI, ANTONIO P. O. BOX 2130, STATION 'B'
Authorized Title Name Address City-State-Zip Title Name Address	Electronic Signature of Registered Agent d Person(s) Detail : MGRM ORSI, ANGELA P. O. BOX 2130, STATION 'B' D: RICHMOND HILL ONTARIO L4E 1A3 MGRM ORSI, PAUL	Name Address	Date MGRM ORSI, ANTONIO P. O. BOX 2130, STATION 'B'

2019 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L00000014621

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANGELA ORSI

REGISTERED AGENT

12/10/2019

FILED Dec 10, 2019

Electronic Signature of Signing Authorized Person(s) Detail