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.

MANAGER

SIGNATURE: CANDICE E BOBECK

Electronic Signature of Signing Authorized Person(s) Detail

3653 REGENT BLVD.

SUITE 406 JACKSONVILLE, FL 32224

### **Current Mailing Address:**

PO BOX 551467 JACKSONVILLE, FL 32255 US

### FEI Number: 27-3513531

#### Name and Address of Current Registered Agent:

THE LILES FIRM, P.A. 301 WEST BAY STREET **SUITE 1030** JACKSONVILLE, FL 32202 US

# The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: /HELEN S. ATTER/

SIGNATURE	: /HELEN S. ATTER/		04/06/2021	
	Electronic Signature of Registered Agent		Date	
Authorized Person(s) Detail :				
Title	MANAGER, AUTHORIZED MEMBER	Title	MANAGER, AUTHORIZED MEMBER	
Name	BOBECK, CANDICE E	Name	BOBECK, CLIFFORD J	
Address	3101 S. PONTE VEDRA BOULEVARD	Address	3101 S. PONTE VEDRA BOULEVARD	
City-State-Zip:	PONTE VEDRA BEACH FL 32082	City-State-Zip:	PONTE VEDRA BEACH FL 32082	

# 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000093037

Entity Name: 3653 NEW REGENT, LLC

# **Current Principal Place of Business:**

Apr 06, 2021 Secretary of State 1270371709CC

FILED

Certificate of Status Desired: No

04/06/2021 Date