FEI Number: Name and Ad	59-3533824 dress of Current Registered Agent:	Certificate of Status Desired: No			
ROGERS, SAMUE 1117 THOMASVIL TALLAHASSEE, F	LE RD.				
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:	SAMUEL B. ROGERS, JRL	01/13/2020			
	Electronic Signature of Registered Agent	Date			
Authorized Person(s) Detail :					

Title	MGRM	Title	MGRM
Name	ROGERS, SAMUEL BJR.	Name	GUNTER, BARTLETT DAVID
Address	1741 MARSTON PLACE	Address	515 SOUTH RIDE
City-State-Zip:	TALLAHASSEE FL 32312	City-State-Zip:	TALLAHASSEE FL 32303

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: ROGERS, SAMUEL BJR.

Electronic Signature of Signing Authorized Person(s) Detail

MGRM

01/13/2020

FILED Jan 13, 2020 **Secretary of State** 1324400662CC

TALLAHASSEE, FL 32303

1117 THOMASVILLE RD.

Current Mailing Address:

DOCUMENT# L98000001602

Current Principal Place of Business:

1117 THOMASVILLE ROAD TALLAHASSEE, FL 32303 US

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2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: CAPITAL PROPERTIES OF LEON COUNTY, L.L.C.

Date