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:

Electronic Signature of Registered Agent

### Authorized Person(s) Detail :

SIGNATURE: ALAN ARP

Title	MGR	Title	MGR
Name	ARP, ALAN	Name	ARP, ANGELA
Address	206 HIDDEN FOREST CT.	Address	206 HIDDEN FOREST CT.
City-State-Zip:	JONESBOROUGH TN 37659	City-State-Zip:	JONESBOROUGH TN 37659

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.

# 206 HIDDEN FOREST CT. JONESBOROUGH. TN 37659

DOCUMENT# M1300000044

206 HIDDEN FOREST CT. JONESBOROUGH. TN 37659

Entity Name: CLA REALTY GROUP, LLC

**Current Principal Place of Business:** 

#### FEI Number: 46-1496600

**Current Mailing Address:** 

## Name and Address of Current Registered Agent:

ARP, ALAN 14980 DAVID DRIVE FORT MYERS, FL 33908 US

#### FILED Mar 18, 2017 Secretary of State CC8811205365

Certificate of Status Desired: No

Date

03/18/2017 Date

Electronic Signature of Signing Authorized Person(s) Detail

PARTNER