609000120710

(Reques	tor's Name)	
(Address	s)	
(Addres	s)	
,	,	
(Cir. (Cir.	nte/Zip/Phone #	
(Спу/Sta	ite/Zip/Prione #	,
PICK-UP	WAIT	MAIL
(Busines	ss Entity Name)	
•		
- (Docum	ent Number)	
(Docum	ent Namber,	
Certified Copies	Certificates of	f Status
Special Instructions to Filing	Officer:	
	•	
}		

Office Use Only



900356543509

12/21/28--01040--002 ++25.00

FFR 0 5 2021 A 7:08



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: December 18, 2020

Order#: 522862/001

Re: IIPS OF FLORIDA, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

 \underline{XX} Check in the amount of \$25.

Please take the following action:

XX __ File in your office on a routine basis.

XX ___ Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Erika Zavala Daza c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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.

	8900 EASTERN COMMERCE PARKWAY	(b)	8900 EAS	STERN COMMERCE PARKWAY			
(a) _	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	JACKSONVILLE, FL 32256		JACKSONVILLE, FL 32256				
	12/18/2009	L	.090001207	'10			
	Date of filing/registration in Florida	4.	Ľ	Document number			
(n)	CT CORPORATION SYSTEM						
. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept, of State						
	1200 SOUTH PINE ISLAND ROAD						
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				20201		
	PLANTATION	FL_33324		:	DEC 2	* . **. * . * * . *	
<i>.</i> 1 \				₹.			
(b) _	Enter name of NEW Registered Agent and/or NEW Registered Office address:				AH 7:		
	Corporation Service Company				: 08		
	NEW Registered Office Address:	•					
	1201 Hays Street						
	Tallahassee	FL_32301					
ange ent w is/we	mited liability company is not organized under the or changes are made, the Florida street address of trill be identical. Or, in the case of a Florida limited re authorized by an affirmative vote of the memberseles of organization or the operating agreement of the control of the control of the control of the control of the operating agreement of the control of the	he registered liability con s of the limit	l office and a pany, it is be ed liability (the business office o hereby confirmed tha company or as other	of the regis at the char	stered nge(s)	
	/s/ Jill Cilmi ure of a member or authorized representative of a member	Jill Ci	lmi, Authori:	ized Person			

rovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept he obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been officed in writing of this change.

ignature of Registered Agent race E. Kirby, Asst. Vice President of Corporation Service Company