15 2000 61964

(Requestor's Name)
(Address)
(Address)
(Chalchar Clarifoliana H)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

	ACCOUNT NO.	:	120000001	95		
	REFERENCE		142194			
	AUTHORIZATION	: (Land de	nan'		
	COST LIMIT	; 	\$/25./00	-		_
ODDED DAME	November 21 2021	,				
ORDER DATE :	November 21, 2021	3				
ORDER TIME :	12:57 PM					
ORDER NO. :	142194-007					
CUSTOMER NO:	7931534					

CHANGE OF AGENT

NAME: CASTLE POINT WELLINGTON, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland-sorenson -- EXT#

EXAMINER:		
T) 1 2 T T T A TT T / T		

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.

. (a)		((b)			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	35 WINDSOR		35 WINDS			
	NORTH HAVEN, CT 06473		NORTH H	IAVEN, CT 06473		
	04/08/2015		L15000061	964		
	Date of filing/registration in Florida	4.	-	Document number		
. (a)						
()	Registered Agent and Registered Office shown on the records	of the Flori	da Dept. of State	::		
	GALLE, CRAIG T					
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRES	<u>S.S)</u>	•		
	13501 SOUTH SHORE BLVD. SUITE 103					
	WELLINGTON	33414				
				293		
(b)				73 73		
` ,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	ed Office a	ddress:	2023 KOV 27		
	Corporation Service Company			_ -		
	NEW Registered Office Address:			-0 , 6		
	1201 Hays Street			?:		
			· .			
	Tallahassee	32301				
nange gent w as/we ie arti	imited liability company is not organized under the lor changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members cles of organization or the operating agreement of the drew Wingate	ne registe liability c s of the lin ne limited	red office and ompany, it is nited liability	I the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.		
				Printed or typed name of signee		

Signature of Registered Agent

Grace E. Kirby, Asst. Vice President