

MO9000001527

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

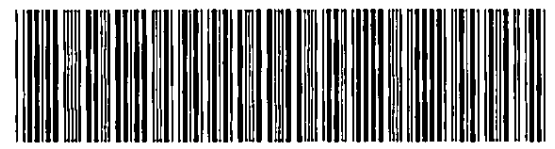
(Business Entity Name)

(Document Number)

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RA & RO change

2022 MAY 27 AM 8:38
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

2022 MAY 27 AM 11:21
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

RECEIVED

A. RAMSEY
MAY 31 2022

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 676506 8331866
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 25.00

ORDER DATE : May 16, 2022
ORDER TIME : 10:23 AM
ORDER NO. : 676506-047
CUSTOMER NO: 8331866

CHANGE OF AGENT

NAME: DH TAMPA, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland

EXAMINER'S INITIALS: _____

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.

1. Name of the limited liability company: DH TAMPA, LLC

2. (a) 90 Park Avenue, 32nd Floor (b) _____
 Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) *(Note: MAY BE POST OFFICE BOX)*

New York, NY 10016

04/21/2009

M09000001527

3. Date of filing/registration in Florida 4. Document number

5. (a) NRAI Services, Inc.
 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)*

Plantation, FL 33324

(b) _____
 Enter name of NEW Registered Agent and/or NEW Registered Office address:

Corporation Service Company

NEW Registered Office Address:

1201 Hays Street

Tallahassee, FL 32301

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 2002 MAY 27 AM 8:38
 STATE OF FLORIDA
 TALLAHASSEE

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

/s/ Jill Cilmi
 Signature of a member or authorized representative of a member

Jill Cilmi, Authorized Person
 Printed or typed name of signee

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

Ami M. Casper
 Signature of Registered Agent

Corporation Service Company
Ami M. Casper, Asst. Vice President