

M16000001422

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

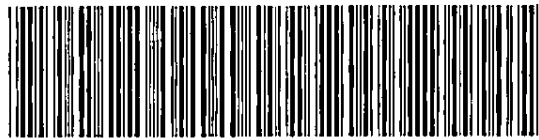
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

Office Use Only



800326647758

19 MAR 21 PM 4: 16

2019 MAR 21 AM 8: 36
SECRETARY OF STATE
141 CALAISSE, FLD 000

APPROVED
AND
FILED



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: 120000000088

Date: 03/21/2019

Name: Merritt Walker

Reference #: 1060703

Entity Name: PSI ATLANTIC NAPLES FL, LLC

- Articles of Incorporation/Authorization to Transact Business
- Amendment
- Change of Agent
- Reinstatement
- Conversion
- Merger
- Dissolution/Withdrawal
- Fictitious Name
- Other _____

2019 MAR 21 AM 8:36
SECRETARY OF STATE
TALLAHASSEE, FL 32301
APPROVED
AND
FILED

Authorized Amount: \$25

Signature: *Merritt Walker*

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: PSI ATLANTIC NAPLES FL, LLC

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

No Change

No Change

3. February 19, 2016 Date of filing/registration in Florida

4. M16000001422 Document number

5. (a) CT Corporation System
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

APPROVED AND FILED
 2019 MAR 21 AM 8:36
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

(b) COGENCY GLOBAL INC.
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

115 North Calhoun St., Suite 4
NEW Registered Office Address:

Suite 4

Tallahassee, FL 32301

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/ James G. Williams
Signature of a member or authorized representative of a member

James G. Williams
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.

/s/ Sean Honan
Signature of Registered Agent

Sean Honan, Assistant Secretary
Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00