

MA0000006431

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

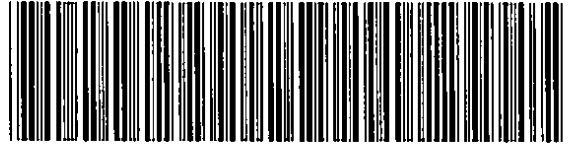
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RECEIVED

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

ACCOUNT NO. : I20000000195
REFERENCE : 842438 7540741
AUTHORIZATION : *Eylien Baker*
COST LIMIT : \$ 25.00

ORDER DATE : June 28, 2023
ORDER TIME : 9:14 AM
ORDER NO. : 842438-001
CUSTOMER NO: 7540741

CHANGE OF AGENT

NAME: TCD 212 CIVICA FL PROPERTY LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker

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: TCD 212 CIVICA FL PROPERTY LLC

2. (a) <u>600 NORTHLAKE BLVD</u> Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>) <u>STE 130</u> <u>ALTAMONTE SPRINGS, FL 32701</u>	(b) <u>600 NORTHLAKE BLVD</u> Mailing address of limited liability company: (<u>Note: MAY BE POST OFFICE BOX</u>) <u>STE 130</u> <u>ALTAMONTE SPRINGS, FL 32701</u>
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3. <u>07/15/2020</u> Date of filing/registration in Florida	4. <u>M20000006431</u> Document number
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5. (a) LACKEY, VICTORIA
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
600 NORTHLAKE BLVD
 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
STE 130
ALTAMONTE SPRINGS, FL 32701

(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

SECRETARY
 TALLAHASSEE
 2023 JUN 29 PM
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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/ Peter Merrigan
 Signature of a member or authorized representative of a member

Peter Merrigan/Manager
 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.

Grace E. Kirby
 Signature of Registered Agent
 Grace E. Kirby, Asst. Vice President