

M/21 66000 S297

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

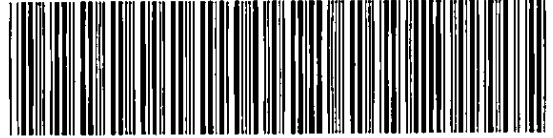
(Business Entity Name)

(Document Number)

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2023 JAN 30 AM 9:59

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A. BUTLER
JAN 31 2023

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

ACCOUNT NO. : I20000000195
REFERENCE : 418902 8262230
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 25.00

ORDER DATE : January 27, 2023
ORDER TIME : 9:18 AM
ORDER NO. : 418902-005
CUSTOMER NO: 8262230

CHANGE OF AGENT

NAME: FP BALDWIN PARK LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Eyllena 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: FP BALDWIN PARK LLC

2. (a) SHOREVIEW AT BALDWIN PARK APARTMENTS (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)

1001 SHOREVIEW DRIVE

100 SOUTH COMMONS SUITE 102

ORLANDO, FL 32807

PITTSBURGH, PA 15212

06/29/2021

M21000008297

3. Date of filing/registration in Florida

4. Document number

5. (a) Roberts, Deborah

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

SHOREVIEW AT BALDWIN PARK APARTMENTS

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

1001 SHOREVIEW DRIVE

1001 SHOREVIEW DRIVE, FL 32807

(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

2023 JUN 30 AM 9:59

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/ Kimberly Philbin

Kimberly Philbin

Signature of a member or authorized representative of a member

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.

Eylina Bahor
Assistant Vice President

Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00