

A10000000747

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

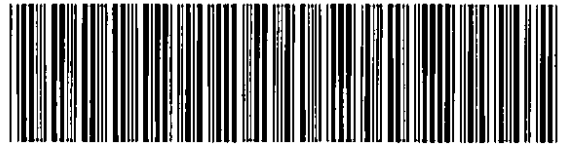
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000412335780

FILED

2023 AUG -9 AM 10:55

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED

2023 AUG -9 AM 11:26

OFFICE  
OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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

ACCOUNT NO. : I20000000195

REFERENCE : 920729 8408630

AUTHORIZATION : 

COST LIMIT : \$ 35.00

-----  
ORDER DATE : August 4, 2023

ORDER TIME : 9:09 AM

ORDER NO. : 920729-034

CUSTOMER NO: 8408630  
-----

CHANGE OF AGENT

NAME: 6737 SOUTHPOINT REALTY, LP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER: \_\_\_\_\_

**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP  
STATEMENT OF CHANGE OF REGISTERED OFFICE OR  
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. 6737 SOUTHPOINT REALTY, LP  
Name of Limited Partnership or Limited Liability Limited Partnership

2. 11/22/2010 3. A10000000747  
Date of filing/registration in Florida Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

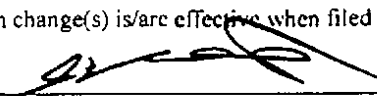
WIDEMAN, EDMUND CIII  
Name  
333 S. GARLAND AVENUE, SUITE 1300  
Address  
ORLANDO, FL 32801  
City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:


Corporation Service Company  
Name  
1201 Hays Street  
Florida street address (P.O. Box not acceptable)  
Tallahassee FL 32301  
City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

Edmund C Wideman III, Authorized Person on behalf of  
6737 SOUTHPOINT MANAGEMENT, LLC, GENERAL PARTNER

  
Signature of General Partner

*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.*

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

Filing Fee: \$35.00  
Certified Copy (optional): \$52.50

2023 AUG - 9 AM 10: 55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED