

BO/00000000 55

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

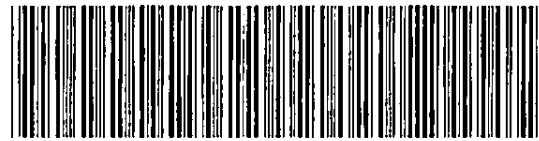
(Document Number)

Copies _____

Certificates of Status _____

Instructions to Filing Officer:

Office Use Only



500408031525

Ltd RA change

FILED
2023 MAY -4 AM 11:36
SECRETARY OF STATE
CORPORATE SERVICES DIVISION

A. RAMSEY
MAY -5 2023

FILED
2023 MAY -4 AM 11:40
SECRETARY OF STATE
CORPORATE SERVICES DIVISION

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

ACCOUNT NO. : I20000000195

REFERENCE : 718682 4371937

AUTHORIZATION :

[Signature]

COST LIMIT : \$.35.00

ORDER DATE : May 3, 2023

ORDER TIME : 10:30 AM

ORDER NO. : 718682-010

CUSTOMER NO: 4371937

CHANGE OF AGENT

NAME: DIVINE & SERVICE, LTD.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker

EXAMINER'S INITIALS: _____

**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. DIVINE & SERVICE, LTD

Name of Limited Partnership or Limited Liability Limited Partnership

2. 02/14/2001

Date of filing registration in Florida

3. B01000000055

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:

C T CORPORATION SYSTEM

Name

1200 SOUTH PINE ISLAND ROAD

Address

PLANTATION, FL 33324

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

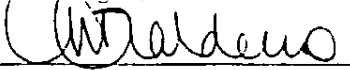
Florida street address (P.O. Box not acceptable)

Tallahassee

FL 32301

City, State and Zip

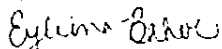
6. Such change(s) is/are effective when filed by the Florida Department of State.



Michelsa Calderon, Assistant Secretary

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

Filing Fee: \$35.00

Certified Copy (optional): \$52.50

2003 MAY 14 AM 11:36
FILED
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA