F1600000 4660

(Rec	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(80	siness Entity Name)	
(Do	cument Number)	
್ಟ Copies	Certificates o	of Status
·; al Instructions to Film	ng Officer.	:

Office Use Only



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MAR 28 2023

CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195					
REFERENCE : 594069 8407616					
AUTHORIZATION : Springera					
COST LIMIT : \$ 35.00					
ORDER DATE: March 17, 2023					
ORDER TIME : 8:09 AM					
ORDER NO. : 594069-006					
CUSTOMER NO: 8407616					
CHANGE OF AGENT					
NAME: L. FISHMAN & SON, INC.					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY					
CONTACT PERSON: Alexxis Weiland-sorenson					

EXAMINER'S INITIALS:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nnge is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida Statutes, the Organized under the laws of the State of Maryland registered agent, or both, in the State of Florida.	
1. The name of	the corporation: L. FISHMAN & SC	on, Inc.	
2. The principal	office address: 6301 E. Lombard S	Street, Baltimore, MD 21224	
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 10/14/2016	Document number: F16000004660	
	l street address of the current registe timent of State: (If resigned, enter re	red agent and registered office on file with the signed)	
	C T Corporation System		
	1200 Pine Island Road		202
	Plantation	FL 33324	2023 MAR
6. The name and (if changed):	l street address of the new registered	agent (if changed) and /or registered office	24 AM
	Corporation Service Company		بغ
	1201 Hays Street		_ =
	P.O	O. Box NOT acceptable	
	Tallahassee	FL 32301	
		creet address of the business office of its registere opted by its board of directors or by an officer so in notified in writing of the change.	d agent,
X	e & Court	Jill Cilmi, Vice President	
Signatur	e of an officer or director	Printed or typed name and title	
I hereby accept I further agree to form duties, and locument is, bein corporation has Corporation	the appointment as registered agen o comply with the provisions of all d I am familiar with and accept the ng filed merely to reflect a change i been notified in writing of this cha n Service Company	nt and agree to act in this capacity. statutes relative to the proper and complete perfo obligation of my position as registered agent. O in the registered office address, I hereby confirm nge.	ormance or if this that the
av Cl	1. M Lei	03/24/2023	
Sign	nature of Registered Agent	Date	
f signing on bel	half of an entity:		
	, Asst. Vice President		
Ty	ped or Printed Name		

* * * FILING FEE: \$35.00 * * *