000 00010406

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates	of Status			
Special Instructions to Filing Officer:					

Office Use Only



100404498771

2023 AFR -4 PM 12: 4')

A POILTR

APR - 5 2023

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO.	:	I20000000195
-------------	---	--------------

REFERENCE : 624566 7239431

AUTHORIZATION :

COST LIMIT : \$25.00

ORDER DATE: March 30, 2023

ORDER TIME : 2:20 PM

ORDER NO. : 624566-001

CUSTOMER NO: 7239431

CHANGE OF AGENT

NAME: AFO, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland-sorenson -- EXT#

EXAMINER: ______

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.

I. N	ame of the limited liability company: AFO, L.L.C.					
2. (a)		(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)		
	TWO ALHAMBRA PLAZA, STE 1040		TWO	O ALHAMBRA PLAZA, STE 1040		
	MIAMI, FL 33134		MIA	MI, FL 33134		
	08/29/2000		L000	000010406		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)					
J. (a)	Registered Agent and Registered Office shown on the records	of the Florid	a Dept.	of State:		
	KOHAN, RICHARD L			207		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			7023 AFR		
	TWO ALHAMBRA PLAZA, STE 1040			πό "		
	MIAMI	33134 FL_				
	·!	۲ لــ		PH 12: 4		
(b)				2:1		
,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	ed Office ac	ddress:			
	Corporation Service Company					
	NEW Registered Office Address:					
	1201 Hays Street					
	Tallahassee I	FL_32301				
change agent was/w the art	limited liability company is not organized under the le or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited tere authorized by an affirmative vote of the members icles of organization or the operating agreement of the chard Kohan	he register liability co s of the lin ne limited	ed offi ompany nited li liability	ice and the business office of the registered y, it is hereby confirmed that the change(s) lability company or as otherwise provided in		
	ature of a member or authorized representative of a member			Printed or typed name of signee		
provis the ob to mer	by accept the appointment as registered agent and a ions of all statutes relative to the proper and complet ligations of my position as registered agent as provia elv reflect a change in the registered office address, d'in writing of this change.	gree to act le perform led for in (I hereby co	t in this ance o Chapte onfirm	s capacity. I further agree to comply with the f my duties, and I am familiar with and accept or 605, F.S. Or, if this document is being filed that the limited liability company has been		

Signature of Registered Agent

Grace E. Kirby, Asst. Vice President