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(Req	uestor's Name)					
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE : 663911 7573497
AUTHORIZATION: Spelle man : 3
COST LIMIT : \$ 25.00
ORDER DATE : May 7, 2022
ORDER TIME: 1:18 PM
ORDER NO. : 663911-100
CUSTOMER NO: 7573497
CHANGE OF AGENT
NAME: ARA-ORANGE PARK LLC
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY
CONTACT PERSON: Alexxis Weiland 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.

1.	Na	me of the limited liability company: ARA-ORANGE F	PARK L	_L() 				
2.	(a)	500 Cummings Center	((b)	500 Cumi	mings Cente	r		
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	 \	(0)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
		Suite 6550			Suite 6550	0			
		Beverly, MA 01915	~		Beverly, M	MA 01915			
		10/17/2001		L	.01000017	845			
3.		Date of filing/registration in Florida	4.	_		Document n	umber	2	
5.	(a)							022	
		Registered Agent and Registered Office shown on the records of the Florida Dept. of State C T CORPORATION SYSTEM			ECOLUMN 17				
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			•				
		1200 SOUTH PINE ISLAND ROAD					主	- 4 1 And 1	
		PLANTATION	33324			-	; · · · · · · · · · · · · · · · · · · ·	l0: 5	المسيدة
		, FL				•	111	\sim	
	(b)	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company	Office a	ddı	<u>ress</u> :	-			
		NEW Registered Office Address:				•			
		1201 Hays Street							
						•			
		Tallahassee, FL	32301						
ch ag wa the	ange ent v as/we e arti	imited liability company is not organized under the laws or changes are made, the Florida street address of the rivill be identical. Or, in the case of a Florida limited liability authorized by an affirmative vote of the members of cres of organization or the operating agreement of the liability of a member or authorized representative of a member or authorized representative of a member	register pility co the lin imited Jill	red om nit lia Ci	office and apany, it is ed liability bility complemi, Author	I the business hereby confirmed or type Printed or type sector. I family 1	s office of the irmed that the as otherwised name of sign	ne regis he char se prov	stered nge(s) rided in
pr the to	ovisi e obli merc	or accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided ly reflect a change in the registered office address. I he is in writing of this change.	e 10 ac erform for in (ereby c	a u tan Ch con	i mis capa ice of my d apter 605, firm that th	cuv. 1 jurthe luties, and 1 c F.S. Or, if t he limited lia	er agree to c am familiar his documen ability compo	ompty with ai at is be any ha	with the nd accept ring filed s been
(**		Drace Y-Kuby	<u>G</u>	ira	ce E. Kirby	v, Asst. Vice	President		
Si	gnatu	re of Registered Agent							