L03 0000 53606

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





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05/26/21--01017--017 **25.00

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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: May 24, 2021

Order#: 825537/037

Re: ST. ANDREWS AT PALM AIRE, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.25.

Please take the following action:

XX File in your office on a routine basis.

XX _ Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Erika Zavala Daza c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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. 1	Name of the limited liability company:ST. ANDREWS	S AT PALI	И AIRE, LL	c.	
2. (a	801 OLD YORK ROAD		(b) 801 OLD YORK ROAD		
<u>ئ, (۱</u>	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0		Mailing address of limited liability (Note: MAY BE POST OFFIC	
	JENKINTOWN, PA 19046		JENKINT	OWN, PA 19046	
	12/16/2003		L03000053	3606	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a	C T CORPORATION SYSTEM				
5. (a)	Registered Agent and Registered Office shown on the records of	`the Florida	Dept. of Stat	~ e:	
	1200 SOUTH PINE ISLAND ROAD				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			_	
	PLANTATION	33324		-	
(b	Enter name of NEW Registered Agent and/or NEW Registered Office address:		_		
	Corporation Service Company				·.
	NEW Registered Office Address:			-	
	1201 Hays Street				
		•		_	NE 21
	Tallahassee	32301		_	. 2
chang agent was/v	limited liability company is not organized under the lage or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	registere ability co of the lim	ed office and mpany, it is ited liability	d the business office of the is s hereby confirmed that the y company or as otherwise p	registered change(s)
	/S/ Michael Scully	Micl	Michael Scully, Authorized Person		
_	nature of a member or authorized representative of a member			Printed or typed name of signee	
provi the od to me	eby accept the appointment as registered agent and age sions of all statutes relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address. I ed in writing of this change.	nertorm	mee at mee	tuties ana Lam tamiliar wu	in ana accent
	DrawitKubly				
Signa	ture of Registered Agent See E. Kirby, Asst. Vice President of Corporation Servic	e Compar	ıy		

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00