(Re	questor's Name)						
(Ad	dress)						
(Ad	dress)						
(Cit	ty/State/Zip/Phone	e #)					
PICK-UP	MAIT	MAIL					
(Business Entity Name)							
(Document Number)							
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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 170804 7644314

Typure

AUTHORIZATION

COST LIMIT : (/\$\25.00

ORDER DATE: October 27, 2021

ORDER TIME : 2:54 PM

ORDER NO. : 170804-053

CUSTOMER NO: 7644314

CHANGE OF AGENT

NAME: GREENWAY HOLDING COMPANY B,

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: GREENWAY H	OLDING	 	COMPANY B, LLC			
2. ((a)		(b))			
,		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(,	Mailing address of limited (Note: MAY BE POST	liability compan	y:	
		9001 EAST COLONIAL DRIVE			9001 EAST COLONIAL DRIVE	AST COLONIAL DRIVE		
		ORLANDO, FL 32817			ORLANDO, FL 32817			
		07/24/2006		ļ	L06000073438			
3.		Date of filing/registration in Florida	- 4.	_	Document number			
5.	(a)							
	(**)	Registered Agent and Registered Office shown on the records of	the Florid	ia I	Dept. of State:			
		LOWMAN, JR., WILLIAM R., ESQ. SHUFFIELD, LOW	MAN & V	۷IL	LSON, P.A.			
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				202		
		1000 LEGION PLACE, SUITE 1700				2021 CET		
		ORLANDO FI	32801			X 29	•	
							. 4	
((b)			_		<u></u>	النف. المهين	
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	l Office as	<u>udı</u>	<u>lresy</u> :	ယ		
		Corporation Service Company				9		
		NEW Registered Office Address:		_				
		1201 Hays Street						
		Tallahassee	32301					
ager was the	nge nt w /we artic /	mited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liagre authorized by an affirmative vote of the members called of organization or the operating agreement of the s/: Jill Cilmi	register ability co of the lin limited	red om nit lia	d office and the business office on npany, it is hereby confirmed that ted liability company or as other ability company. Silmi, Authorized Person	f the registere at the change(wise provided	ed s)	
Si	gnat	ure of a member or authorized representative of a member			Printed or typed name of	signce		
pro the to n	visio obli tere	oy accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete gations of my position as registered agent as provide by reflect a change in the registered office address. I h I in writing of this change.	ree to ac perform d for in t hereby c	t it tar Cli ron	in this capacity. I further agree t nce of my duties, and I am famili hapter 605, F.S. Or, if this docu nfirm that the limited liability coi	o comply with ar with and a ment is being mpany has be	h the eccept filed en	
Sign	iatur	C of Registered Agent	Grace	E.	. Kirby, Asst. Vice President			