## L06000084859

	(Requestor's Name)						
	(Address)						
	(Address)						
	(City/State/Zip/Phone #)						
PICK-UF	WAIT	MAIL					
	(Business Entity Name)						
	(Document Number)						
	(00000)						
Certified Copies	Certificates of Sta	tus					
Special Instructions	to Filing Officer:						
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Office Use Only



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A. RAMSEY OCT - 7 2022

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

ACCOUNT NO. : 120000000195  REFERENCE : 97348310 27941640  AUTHORIZATION :						
COST LIMIT : \$ 25.00						
ORDER DATE : September 26, 2022  ORDER TIME : 9:06 AM  ORDER NO. : 973433-105						
CUSTOMER NO: 7941640						
CHANGE OF AGENT						
NAME: EQUITABLE TITLE OF WEST ORLANDO, LLC						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY X PLAIN STAMPED COPY						
CONTACT PERSON: Eyliena Baker 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.

١.	Na	me of the limited liability company:	UITABLE TITL		441	EGI ONLA	
2.	(e)	100 W. Plant Street		(b) 6900 TURKEY LAKE ROAD			
۷.	(α)	Principal office address of limited liability (Note: MUST BE STREET ADDR		. `	-,		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Winter Garden, FL 34787				SUITE 1-1	0
				- -	-	ORLANDO	D, FL 32819
		08/28/2006			L	060000848	859
3.		Date of filing/registration in Flo	rida	4.			Document number
5	(a)	MCGRAW, JON, ESQ					
J,	(a)	Registered Agent and Registered Office shown or 6900 TURKEY LAKE ROAD	the records of the	Florid	аΓ	Pept. of State	:
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
		SUITE 1-10				. 20	
		ORLANDO	, FL_3	2819			20 PM
	(b)	Enter name of NEW Registered Agent and/or NEW Registered Off		ffice su	ldr	dress:	PIRE OCT -6 PHIZ
		Corporation Service Company  NEW Registered Office Address:					26
		1201 Hays Street					
		Tallahassee	, FL_3	2301	_	<u>-</u>	
cha age	inge ent w s/we	mited liability company is not organized or changes are made, the Florida street avill be identical. Or, in the case of a Florice authorized by an affirmative vote of the cles of organization or the operating agree	ddress of the re da limited liabi le members of (	gister ility co the lin	ed om nite	office and pany, it is ed liability	hereby confirmed that the change(s) company or as otherwise provided in
/S/ Dianne Harris		Dia	nn		Authorized Person		
		ure of a member or authorized representative of a					Printed or typed name of signee
I h pro the to i	ereb visio obli nere	by accept the appointment as registered a cons of all statutes relative to the proper a gations of my position as registered agenty reflect a change in the registered official in whiting of this change.	gent and agree nd complete pe nt as provided f e address, I her	to act inform or in t reby c	t ir an Ch on,	n this capa ce of my di apter 605, firm that th	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been
	_	e of Registered Agent		Gi	rac	e E. Kirby	, Asst. Vice President