LO8 0000a0397

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

Office Use Only



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O SIMMONS JUN 25 2021



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: May 19, 2021

Order#: 819975/018

Re: GREENPOINTE HOLDINGS, LLC

Enclosed please find:

Change of Registered Agent and Office.

XX Check in the amount of \$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:Ami Casper 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.

Name of the limited liability company: GREENPOINTE HOLDINGS, LLC						
2. (a	a)	7807 Baymeadows Road East	(h)		
(·	••,	Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)		,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		Suite 205				
		Jacksonville, FL 32256	_			
		02/26/2008		L0800002	20397	
3.		Date of filing/registration in Florida	4.		Document number	
5. (a)	Feldman & Mahoney, P.A.				
-// (•••,	Registered Agent and Registered Office shown on the records of	ate:			
		2240 Belleair Road, Suite 210				
		Registered Office Address (MUST BE FLORIDA STREET				
				_	5 % Frank E75	
		Clearwater	33764		1987 24	
		,]-]	·		~ ~	
(1	o)					
•	•	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	l Office ac	ldress:		
		Corporation Service Company				
		NEW Registered Office Address:				
		1201 Hays Street				
		Tallahassee Fi	32301		<u> </u>	
chan agen was/ the a	ge t we we	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lie are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the ward E. Burr	registere ability co of the lin- limited l	ed office a ompany, it nited liabil liability co	nd the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in mpany.	
/s/ Edward E. Burr Edward E. Burr Signature of a member or authorized representative of a member					Printed or typed name of signee	
I he prov the o to m notif	reh isio bli ere lieg	by accept the appointment as registered agent and agrous of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address. It is writing of this change.	perform d for in C hereby co Corporat	ance of my Thapter 60 onfirm that ion Servic	pacity - I further agree to comply with the	