3/10/2021

Division of Corporations



(((H210000982123)))



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From:

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Account Number : FCA000000023 Phone : (614)280-3338

Fax Number : (954)208-0845

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2021 HAR 1 O

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.

	ame of the limited liability company:	, 1. N		
. (a)	Principal office address of limited hability company: (Note: MUST BE STREET ADDRESS)	(D)	Mailing address of limited (Note: MAY BE POST	
	200 Powell Place	20	U Powell Piace	-
	Brentwood, TN 37027	14,	entwood, TN 37027	
	Diemwood, 14 310-1			·····
	08/04/2014		0000125433	
	Date of filing/registration in Florida		Document number	
16	REGISTERED AGENT SOLUTIONS, INC.			
(a)	Registered Agent and Registered Office shown on the records	of the Florida Dep	nt, of State	
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)		202
	155 OFFICE PLAZA DR , SUITE A			2021 MAR 10
	TALLAHASSEE	FL 32301		7
				·3 (*)
	C T Companion System			
(b)				13.35 13.35 11.42 11.42
(b)		ed Office address	 Y	## 12: 1 8
(b)		ed Office address	i	F 51/25 F 10075
(b)		ed Office address	ĵ'	F. S. L. C. S. C.
(b)	Enter name of NEW Registered Agent and/or NEW Register	ed Office address	<u> </u>	## 12: 18
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u> NEW Registered Office Address: 1200 South Pine Island Road			E. 15. 18.
	Enter name of NEW Registered Agent and/or NEW Register NEW Registered Office Address: 1200 South Pine Island Road Plantation	FL 33324		# 12: 18 *** 16:55
the I	Enter name of NEW Registered Agent and/or NEW Register NEW Registered Office Address: 1200 South Pine Island Road Plantation imited liability company is not organized under the	FL 33324 laws of the Sta	te of Florida, it is hereby con	firmed that after
the I	Enter name of NEW Registered Agent and/or NEW Register NEW Registered Office Address: 1200 South Pine Island Road Plantation imited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited	FL 33324 laws of the Sta of the registers liability comp	te of Florida, it is hereby coned office and the business offany, it is hereby confirmed the	firmed that after ice of the registere at the change(s)
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the I e cha cent v as w e art Signa Signa covis e obi	Enter name of NEW Registered Agent and/or NEW Register NEW Registered Office Address: 1200 South Pine Island Road Plantation imited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of the MHM MONIME.	F1. 33324 F1. always of the State of the registers in the limited he limited liabi	te of Florida, it is hereby conced office and the business offany, it is hereby confirmed the Hiability company or as other hity company. Exchine authorized person Printed or typed name of this company.	firmed that after ice of the registere at the change(s) rwise provided in signee

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3/10/2021

Division of Corporations

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(((H210000982143)))



H210000982143ABC.

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To:

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u>

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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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	ame of the limited liability company:	MY REAL	ESTATE	, LLC			
2. (a)	·						
2. ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(· /	Ma	iling address of limited Note: MAYBE POST	liability cor	npany:	
	200 Powell Place	20	00 Powell P	face			
	Brentwood, TN 37027	B	rentwood, T	N 37027			
	08/04/2014		3000002				
3.	Date of filing/registration in Florida	4.	Γ.	ocument number			
	REGISTERED AGENT SOLUTIONS, INC.						
5. (a)	Registered Agent and Registered Office shown on the records of	the Florida De	pt of State.				
			<u>.</u>		• •	20	
	Registered Office Address (MUST BE FLORIDA STREET)	<u>ADDRESS)</u>				2021 MAR 1.0	
	155 OFFICE PLAZA DR , SUITE A					ÁŔ	
	TALLAHASSEE , FI	32301				10	1
d.	C.T. Corporation System				15 30 AV 21	PH 12:	[]
(b)	Enter name of NEW Registered Agent and/or NEW Registered	d Office addres	<u>ـــــ</u>		D21.	-	
					, ,	CE9	
	NEW Registered Office Address						
	1200 South Pine Island Road						
	Plantation, FU	33324					
the cha agent was/w the art	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	f the register iability comp of the limited climited liab	ed office a pany, it is l d liability of ility comp	ind the business off tereby confirmed the company or as othe	ice of the rat the cha	महर्दाक्ष महिद्यास	red
	nure of a member or authorized representative of a member			tinted or typed mane of	i signee		
I here provis the ob- to mer notifie By	thy accept the appointment as registered agent and age in sofall statutes relative to the proper and complete ligations of my position as registered agent as provide elv reflect a change in the registered office address. I d in writing of this change. CT Corporation System Peter Travinski - Assistant So	e performance ed for in Cha hereby conf	this cana	in Hurther auree	e ta campl	v with t ind acc leing fi as beer	he ept led 1

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