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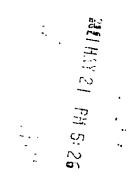
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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Codification of Status				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



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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: Ami Casper ami.casper@cscglobal.com

Date: May 19, 2021

Order#: 819975/006

Re: AWV, LLC

Enclosed please find:

XX 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.

1. N	ame of the limited liability company: AWV, LLC		
2. (a)	7807 Baymeadows Road East	(b)	
2. ()	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		
	02/16/2011	L1100	0020846
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 the Florida Dept. of State:		
	2240 Belleair Road, Suite 210		
	Registered Office Address (MUST BE FLORIDA STREET		
	Clearwater	33764	دي. و
(b)	,,	<u></u>	
	Enter name of NEW Registered Agent and/or NEW Registered		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	l Office address:	<u> </u>
	Corporation Service Company		7
	NEW Registered Office Address:	•	—
	1201 Hays Street		. G
	TallahasseeFI	32301	
change agent v was/wi the arti	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 like ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	ws of the State of registered offic ability company of the limited lia limited liability	te and the business office of the registered . it is hereby confirmed that the change(s) ability company or as otherwise provided in company.
	lward E. Burr	Edward E.	Printed or typed name of signee
I here provisi the obj to mer notifie		performance of d for in Chapter hereby confirm Corporation Sci	eanacity. I further agree to comply with the