## L14000082173

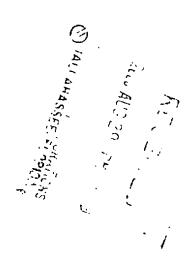
	(Requestor's Name)				
	(Āddress)				
<del></del> -	(Address)				
	(City/State/Zip/Phone #)				
PICK-UP	WAIT MAIL				
	(Business Entity Name)				
(Document Number)					
Certified Copies	Certificates of Status				
Special Instructions to Filing Officer:					

Office Use Only



100414579111





S R 2 CATO SEP - 1 2023 CORPORATION SERVICE COMPANY
1201 Hays Street
Tallbassee FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195					
REFERENCE : 920729 8408630					
AUTHORIZATION: (June in 2017)					
COST LIMIT : \$ 25.00					
ORDER DATE : August 4, 2023					
ORDER TIME : 2:04 PM					
ORDER NO. : 920729-010					
CUSTOMER NO: 8408630					
CHANGE OF AGENT					
NAME: 200 ORANGE MANAGEMENT, LLC					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX 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.

i. Na	me of the limited liability company:  200 ORANGE	MANAG	EM	MENT, LLC
2. (a)		(	(b)	)
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	8633 SOUTH BAY DR.			8633 SOUTH BAY DR.
	ORLANDO, FL 32819	<del></del>		ORLANDO, FL 32819
	05/20/2014		į	L14000082173
3.	Date of filing/registration in Florida	<del></del> 4.	_	Document number
5. (a)				
). (a)	Registered Agent and Registered Office shown on the records of	of the Florid	da I.	Dept. of State:
	WIDEMAN, EDMUND C, III			
	Registered Office Address (MUST BE FLORIDA STREE	TADDRES	<u>SS)</u>	2
	8633 SOUTH BAY DR.			2073
	ORLANDO .	32810		
	ORLANDO	L		<u> </u>
41.5				•
(b) .	Enter name of NEW Registered Agent and/or NEW Registered	ed Office a	ddr	iress:
				lress: స్త్ర
	Corporation Service Company			F
	NEW Registered Office Address:			
	1201 Hays Street			
			-	
	Tallahassee	TL		
change agent w was/we	mited liability company is not organized under the last or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited for authorized by an affirmative vote of the members cles of organization or the operating agreement of the	ne register liability c of the lir	red om mit	d office and the business office of the registered upany, it is hereby confirmed that the change(s) ted liability company or as otherwise provided in
/S/ Edi	mund C. Wideman III	Ed	lmu	und C. Wideman III, Authorized Person
Signati	ure of a member or authorized representative of a member			Printed or typed name of signee
I hereb provisio	oy accept the appointment as registered agent and agons of all statutes relative to the proper and complete gations of my position as registered agent as provide	gree to ac e perforn led for in	t ir nan Ch	in this capacity. I further agree to comply with the nce of my duties, and I am familiar with and accep, hapter 605, F.S. Or, if this document is being filed nfirm that the limited liability company has been
o mere onified	in writing of this change.	l héreby c	con	nfirm that the limited liability company has been
топрива	Iv reflect a change in the registered office address, I in writing of this change.  One of Registered Agent	l héreby c	con	nfirm that the limited liability company has been

FILING FEE: \$25.00