(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
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Account#: 120000000088

Date:_	06/21/2022						
Name:	Merritt V	Valker					
	nce #: 17						
			T SAN JOSE, LLC				
	Articles of Incorporat	ion/Authorization t	o Transact Business				
	Amendment						
\checkmark	Change of Agent						
	Reinstatement						
	Conversion						
	Merger						
	☐ Dissolution/Withdrawal						
	Fictitious Name						
	Other						
Authori	zed Amount:	\$25					
Signatu	ure:	mw	. _				

F: 800.944.6607



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Account#: I20000000088

Date:	06/21/2022	■.					
Name:	Merritt Walk	er					
	171313						
Entity Name	AN JOSE, LLC						
Articl	es of Incorporation/Au	ithorization to Tra	ansact Business				
Amer	Amendment						
✓ Char							
☐ Reins	Reinstatement						
Conv	Conversion						
☐ Merg	☐ Merger						
☐ Dissolution/Withdrawal							
☐ Fictitious Name							
Othe	r	<u>.</u>					
Authorized A	Amount:	\$25					
Signature: _	mw	, <u> </u>					

F: 800.944.6607

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.

L. No	ame of the limited liability company:	WATERCRE	ST SAN JO	SE, LLC
2. (a)	1515 Indian River Blvd, Suite A	232	(b)	
2 . ()	Principal office address of limited lia (Note: MUST BE STREET A)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Vero Beach, Florida, 32960			
	January 21, 2015			1.45000044547
3.	January 21, 2015 Date of filing/registration in	Florida	- ——— 4.	L15000011517 Document number
	WILLIAMS TOWN T			
5. (a)	Registered Agent and Registered Office show	on on the records of t	he Florida Dept. o	f State:
	445 24TH STREET		•	
		LORIDA STREET A	(DDRESS)	
(h)	SUITE 300			
	VERO BEACH	, FL	32960	
	COGENCY GLOBAL INC.			FIL 2022 JUN 22 SECRETARY FALL AHASS
` '	Enter name of <u>NEW Registered Agent</u> and/o	or NEW Registered	Office address:	
	115 North Calhoun St., Suite 4	.		
	NEW Registered Office Address:			OF STATE
	Tallahassee	, FL_	32301	
the cha agent v was/we the arti	inge or changes are made, the Florida vill be identical. Or, in the case of a F ere authorized by an affirmative vote c cles of organization or the operating a	street address of Torida limited lia of the members o	the registered c bility company I the limited lia limited liability	• •
	oan Williams ture of a member or authorized representative of		Joan Willia	
			e e en marin de dels	Printed or typed name of signee
provisi the obl to mere	by accept the appointment as registerd ons of all statutes relative to the prop- igations of my position as registered of My reflect a change in the registered of Tin writing of this change.	a agent and agreer and complete page to the asprovided affice address, I had been as a supplied to the address and the address and the address and the address	ze to act in this performance of I for in Chapter ereby confirm	capacity. I further agree to comply with the my duties, and I am familiar with and accept 605, F.S. Or, if this document is being filed that the limited liability company has been

/s/ Timothy Mayville Signature of Registered Agent

Timothy Mayville, Assistant Secretary
Division of Corporations P.O. Box 6327 Tallahassec, FL 32314
FILING FEE: \$25.00