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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: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: December 15, 2020

Order#: 544755/025

Re: PARALLEL FLORIDA, 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:Erika Zavala Daza 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.

ı. Na	ame of the limited liability company: PARALLEL FL	ORIDA	, LLC					
2. (a)	2203 N Lois Ave M275	2203 N I	3 N Lois Ave M275					
. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(b).		Mailing address of (Note: MAY)			
	TAMPA, FL 33607		-	TAMPA,	FL 33607			
	01/30/2015		L	1500001	8741			
3.	Date of filing/registration in Florida	4.			Document nu	ımber		
5. (a)	C T CORPORATION SYSTEM							
). (u)	Registered Agent and Registered Office shown on the records	of the Flo	rida D	ept. of Sta	ite:			
	1200 SOUTH PINE ISLAND ROAD							
	Registered Office Address (MUST BE FLORIDA STREE	TADDR	ESS)					
					_			
	PLANTATION	3332 FL	!4				17.97	
	,	rL					2920 OE	: :
(b)						•	C -	
(-)	Enter name of NEW Registered Agent and/or NEW Register	ed Office	addr	<u>ess</u> :		• .*		:
	Corporation Service Company				_		e: PH 6:	ا ادر د
	NEW Registered Office Address:						ယ ထ	
	1201 Hays Street				<u></u>			
	Tallahassee	FL 3230	11					
hange igent v was/we he arti	imited liability company is not organized under the le or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the company of the c	he regis liability s of the ne limite	tered com limited lia	office and pany, it be a liabili bility con	nd the business is hereby confi ity company or	office of t rmed that t	he regist the chan	tered ge(s)
Signa	ture of a member or authorized representative of a member	_			Printed or type	d name of sig	nce	
l here provisi he obi to mer notifie	by accept the appointment as registered agent and a ions of all statutes relative to the proper and comple- ligations of my position as registered agent as provide ely reflect a change in the registered office address, d in writing of this change.	gree to te perfo ded for t I hereby	act ir rman in Ch v con	i this cap ce of my apter 60 firm that	pacity. I furthe	r agree to	comply	with the d accept ing filed been
Cianata	Macatkoby The of Registered Agent							

Grace E. Kriby, Asst. Vice President of Corporation Service Company