(Requestor's Name)						
(Address)						
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(0) (0) 107 (0) (0)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
(2000)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
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D ETROL

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE : 621166 7226307
AUTHORIZATION Smelle na
COST LIMIT : U\$ 25.00
ORDER DATE : April 14, 2022
ORDER TIME : 1:48 PM
ORDER NO. : 621166-007
CUSTOMER NO: 7226307
CHANGE OF AGENT
NAME: AW FLORIDA MOB III MANAGER, 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.

l. N	ame of the limited liability company: AW FLORIDA M	OB III	I MA	NAGER,	LLC
2. (a)	11780 US HIGHWAY ONE		(b)	11780 U	S HIGHWAY ONE
<b>5</b> . (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(0)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	SUITE 305			SUITE 30	05
	NORTH PALM BEACH, FL 33408	<del>-</del>	NORTH PALM BEACH, FL 33408		
	05/01/2015		L	1500007	7600
3.	Date of filing/registration in Florida	4.	_		Document number
5. (a)	WAXMAN, BRIAN K				
,	Registered Agent and Registered Office shown on the records of t			Oept. of Stat	 le: 
	Registered Office Address (MUST BE FLORIDA STREET A	DDRE	<u>:SS)</u>		σ 🔊
	SUITE 305				EIL 2022 APR 15 SECRETARY TALLAHASS
	NORTH PALM BEACH . FL	33408	8		
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Of</u> Corporation Service Company			ess:	PR 15 PM 6: 23 TARY OF STATE AHASSEE, FL
	NEW Registered Office Address:				
	1201 Hays Street				_
	Tallahassee FL_	32301	1		_
change igent v was/w	imited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia- ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the l	registe bility f the li	ered com imit	office an pany, it is ed liabilit	d the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in
/S/ Brian K. Waxman			Brian K. Waxman, Manager		
	ture of a member or authorized representative of a member				Printed or typed name of signee
provisi he obl o merc	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I had in writing of this change.	re to a perfori for in ereby	ict ir man n Ch con	this cape ce of my c apter 605 firm that	acity. I further agree to comply with the duties, and I am familiar with and accept , F.S. Or, if this document is being filed the limited liability company has been
	Drace CKuby	(	Grac	e E. Kirb	y, Asst. Vice President
Signatu	re of Registered Agent				