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Division of Corporations

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From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338

Fax Number : (954)208-0845

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LLC REGISTERED AGENT CHANGE FC ENCORE DELTONA, LLC

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DATE 5.14.2020

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MAY 2 U 2020

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	ime of the limited liability company: FC Encore Deltor	ia, LLC	
2. (a)	3500 Lenox Road, NE	(b) 3500 Lenox Road, NE	
(a)	Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Suite 510	Suite 510	
	Atlanta, GA 30326	Atlanta, C	GA 30326
	09/03/2015	L15000151	620
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Corporation Service Company		
·. (u)	Registered Agent and Registered Office shown on the records of 1201 Hays St	the Florida Dept, of Sta	tte:
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	
	Tallahassee, FI.	32301	
(b)	C T Corporation System		2020 XLLA
,,,,	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	THAY TANK
	1200 South Pine Island Road		には
	NEW Registered Office Address:		PROBLEMAY IF MHIO: 25 TALL ATTASSET LORIDA
	Plantation . FI	33324	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
the cha agent was/w	imited liability company is not organized under the large or changes are made, the Florida street address owill be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of licles of organization or the operating agreement of the	ws of the State of F f the registered offic ability company, it of the limited liability co	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in impany.
	/ Patricia Belanger	Patricia Belang	Printed or typed name of signee
There provis the ob to mer notifie By:	ture of a member or authorized representative of a member by accept the appointment as registered agent and ag ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. I d'in writing of this change. 15! Michele Holden, Asst Sect ire of Registered Agent	ree to act in this ca performance of m ed for in Chapter 60 hereby confirm tha	mucity. I further insert to comply with the