5/14/2020

Division of Corporations

## ion of **Som**orations

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LLC REGISTERED AGENT CHANGE FC ENCORE LAKELAND, LLC

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## 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.	Nε	me of the limited liability company: FC Encore Lakelan	d, L.I.	.C		
2	(a)	3500 Lenox Road, NE		(b)	3500 Lenc	x Road, NE
۷.	(4)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_	(**)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Suite 510	_		Suite 510	
		Atlanta, GA 30326	_		Atlanta, G.	A 30326
		09/04/2015		1	.150001517	745
3.		Date of filing/registration in Florida	4.			Document number
5.	(a)	Corporation Service Company	***		C C	
		Registered Agent and Registered Office shown on the records of the 1201 Hays St	ie Flo	rida i	Jept. of Stat	e:
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		20 2.		
		Tallahassec , FL	3230	1		VHV FIR
	(b)	C T Corporation System				
		Enter name of NEW Registered Agent and/or NEW Registered (	Office	add	<u>ress</u> :	
		1200 South Pine Island Road				9:   7   0   17
		NEW Registered Office Address:				
		Plantation, FL_	3332	4		
th ag w	e ch gent as/w	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	the r bilit f the limit	egis y co limi ed li	mpany, it ted liabili ability cor	is hereby confirmed that the change(s) ty company or as otherwise provided in mpany.
_		s/ Patricia Belanger		Patri	eia Belange	Printed or typed name of signee
th to	here rovis se ob mes otifie	whenever of a member or authorized representative of a member or authorized representative of a member or authorized representative of a member and agricions of all statutes relative to the proper and complete ligations of my position as registered agent as provided rely reflect a change in the registered office address, I have a writing of this change.  /s/ Michele Holden, Asst Sect	ee to perfo i for veret	act ormo in C oy co	in this cap ince of my hapter 60 infirm that	pacity. I further agree to comply with the
		ure of Registered Agent				