L1500016	21758
(Requestor's Name) (Address) (Address)	900394371419

MAIL

Office Use Only

(Crty/State/Zip/Phone #)

(Business Entity Name)

(Document Number)

Certificates of Status _

WAIT

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- (*** デージョンD) 2022 & EP 12 PM 3: 37



CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO.	:	12000000	0195	
REFERENCE	:	949283	8363506	
AUTHORIZATION		utsiler	aan	
COST LIMIT		\$~25.00		

, ₁

- ORDER DATE : September 12, 2022
- ORDER TIME : 2:48 PM
- ORDER NO. : 949283-005
- CUSTOMER NO: 8363506

CHANGE OF AGENT

NAME: LEVIATHAN GROUP I, LLC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY

 XX
 PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER:

ATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

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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.

1. Na	ame of the limited liability company:	GROUP	I, L	LC.				
2. (a)	2250 N. Druid Hills Rd NE,		(b)	2250 N. D	Druid Hills Rd I	NE,		
2. (d)	Principal office address of limited liability company: (<i>Note: MUST BE STREET ADDRESS</i>)				dailing address o (<u>Note: MAY B</u>		-	• •
	STE 250			STE 250				
	Atlanta, GA 30329			Atlanta, G	A 30329			
	09/23/2015		ļ	15000161	758			
3.	Date of filing/registration in Florida	4.	-		Document nui	mber		
5 (0)								
5. (a)	Registered Agent and Registered Office shown on the records of	of the Flo	rida	 Dept. of State	- ::			
	DiCarlantonio, Reno					54	2	
	Registered Office Address (MUST BE FLORIDA STREE	T.ADDRI	ESS)			2C	2022	
	8130 Baymeadows Way West Suite 302						SEP	
	Jacksonville	3225	6			4	12	====== = = ====
		ь <u> </u>				24	AH	
(b)					_		AH 11:	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	ed Office	add	ress:			10	
	Corporation Service Company							
	NEW Registered Office Address:				•			
	1201 Hays Street							
	Tallahassee H	3230	1					
المعامم ال			h.a. 6	Ctata of Flo	uide it is bore	huaadim	and the	t ofter the
change agent v was/we	imited liability company is not organized under the later or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited for authorized by an affirmative vote of the members cles of organization or the operating agreement of the term.	ne regist liability s of the l	ereo cor limi	d office and npany, it is ted liability	l the business hereby confir company or a	office of the of the office of	he regi he cha	stered nge(s)
	/s/Kristen Jenkins				Authorized P	erson		
Signa	ture of a member or authorized representative of a member	_			Printed or typed	name of sig	nec	
l herei provisi the obl to mere notified	by accept the appointment as registered agent and ag ons of all statutes relative to the proper and complet igations of my position as registered agent as provid ely reflect a change in the registered office address, a l'in writing of this change.	gree to a le perfoi led for it I hereby						with the nd accept ging filed is been
	/s/Grace E. Kirby		Gr	<u>ace E. Kirt</u>	by. Asst Vice	e Presider	<u>it</u>	
Signatu	re of Registered Agent							

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 FILING FEE: \$25.00