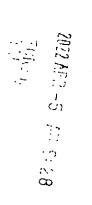
## 215000192820

| (Requestor's Name)                      |   |  |  |  |  |
|---|---|--|--|--|--|
| (Address)                               |   |  |  |  |  |
| (Address)                               |   |  |  |  |  |
| (City/State/Zip/Phone #)                |   |  |  |  |  |
| PICK-UP WAIT MAI                        | L |  |  |  |  |
| (Business Entity Name)                  |   |  |  |  |  |
| (Document Number)                       |   |  |  |  |  |
| Certified Copies Certificates of Status |   |  |  |  |  |
| Special Instructions to Filing Officer  |   |  |  |  |  |
|   |   |  |  |  |  |
|   |   |  |  |  |  |
|   |   |  |  |  |  |
|   |   |  |  |  |  |

Office Use Only



400385140024



2022 APR -5 PH 3: 36

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

| ACCOUNT NO. : 120000000195  REFERENCE : 590463 1 4702973       |  |  |  |  |  |  |
|--|--|--|--|--|--|--|
| AUTHORIZATION : COST LIMIT : \$ 25.00                          |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| ORDER DATE : April 5, 2022                                     |  |  |  |  |  |  |
| ORDER TIME : 11:39 AM  |  |  |  |  |  |  |
| ORDER NO. : 590463-007   |  |  |  |  |  |  |
| CUSTOMER NO: 4702973   |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| CHANGE OF AGENT  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| NAME: AVANTI DUBILL INTERESTS 8, LLC                           |  |  |  |  |  |  |
| PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY |  |  |  |  |  |  |
| XX_ PLAIN STAMPED COPY   |  |  |  |  |  |  |

EXAMINER:

CONTACT PERSON: Eyliena Baker -- EXT#

## 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.

| Name of the limited liability company: |  |   | (b) 923 N PENNSYLVANIA AVE                                |   |  |
|--|--|---|---|---|--|
| <u>.</u> . (α)                         | Principal office address of limited liability company; (Note: MUST BE STREET ADDRESS)  |   | o)  | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)  |  |
|  | WINTER PARK, FL 32789  | <u> </u>  | WINTER  | PARK, FL 32789  |  |
|  | 11/17/2015   |   | L1500019  | 92820   |  |
| 3.                                     | Date of filing/registration in Florida   | 4.  |   | Document number   |  |
| 5. (a)                                 | DUBILL, ANDREW   |   |   |   |  |
| 2. (4,                                 | Registered Agent and Registered Office shown on the records of the Florida Dept, of State  923 N PENNSYLVANIA AVE  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  |   |   |   |  |
|  |  |   |   | 922   |  |
|  | WINTER PARK  | FL_32789  |   | 2072 AP2 -5   |  |
| 41.5                                   |  |   |   | 72.4  |  |
| (b)                                    | Enter name of NEW Registered Agent and/or NEW Register   | red Office ac   | dress:  | _ ·:<br>.:  |  |
|  |  |   | <del></del>   | 8×3×  |  |
|  | Corporation Service Company  |   |   | (C)   |  |
|  | NEW Registered Office Address:   |   |   | _   |  |
|  | 1201 Hays Street   |   |   | _   |  |
|  | Tallahassee1   | FL32301   |   | _   |  |
| change<br>agent :<br>was/w             | limited 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 case of organization or the operating agreement of the case of organization or the operating agreement of the case of organization or the operating agreement of the case of organization or the operating agreement of the case of organization or the operating agreement of the case of | he register<br>liability co<br>s of the lin             | ed office ar<br>ompany, it i<br>nited liabili             | nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in  |  |
|  | S/ Andrew Dubill   | And   | drew Dubill,  | , Authorized Person   |  |
| Signa                                  | ature of a member or authorized representative of a member   |   |   | Printed or typed name of signee   |  |
| provis<br>the ob<br>to mer             | by accept the appointment as registered agent and a ions of all statutes relative to the proper and completing at a specific provided in the registered agent as provided in the registered office address, and in writing of this change.   | gree to act<br>te perform<br>led for in G<br>I hereby c | t in this cap<br>ance of my<br>Chapter 60,<br>onfirm that | pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been |  |
|  | tre of Registered Agent of E. Kirby, Asst. Vice President  |   |   |   |  |