## 1160000086011

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





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2022 APR 15 PM 3: 26

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195					
REFERENCE : 621166 7226307					
AUTHORIZATION: Spelle man					
COST LIMIT : \$25.00					
ORDER DATE : April 14, 2022					
ORDER TIME : 1:50 PM					
ORDER NO. : 621166-013					
CUSTOMER NO: 7226307					
CHANGE OF AGENT					
NAME: AW RIVERBEND, LLC					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY  XX PLAIN STAMPED COPY					
CONTACT PERSON: Eyliena Baker EXT#					

± 4

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. Na	ame of the limited liability company: AW RIVERBEN	D, LL	С	
2. (a)	11780 US HIGHWAY ONE		(b)11780 US HIGHWAY ONE	
2. ()	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 305		SUITE 30	5
	NORTH PALM BEACH, FL 33408		NORTH F	PALM BEACH, FL 33408
	05/02/2016		L16000086	5011
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	JONES FOSTER SERVICE, LLC			
J. (u)	Registered Agent and Registered Office shown on the records of 505 S. FLAGLER DRIVE	the Flo	rida Dept. of Stati	- 2:
	Registered Office Address (MUST BE FLORIDA STREET) SUITE 1100	ADDR	ESS)	2922 AFR
	WEST PALM BEACH	3340	1	
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office	address:	- 12 - 12 - 13
	Corporation Service Company			
	NEW Registered Office Address:			-
	1201 Hays Street			-
	Tallahassee F1_	3230	1	_
change agent v was/wo	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liabre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	regist ability of the l	ered office and company, it is limited liability	If the business office of the registered thereby confirmed that the change(s) company or as otherwise provided in
	/S/ Brian K. Waxman Brian K. Waxm			
	ture of a member or authorized representative of a member			Printed or typed name of signee
provisi the obl to mere	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address. I have by writing of this change.	ee to e perfor d for it tereby	act in this cape rmance of my e n Chapter 605 confirm that t	wity. I further agree to comply with the luties, and I am familiar with and accept , F.S. Or, if this document is being filed he limited liability company has been
	Cre Cregistered Agent	1	Grace E. Kirby	y. Asst. Vice President