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(Re	questor's Name)						
(Ad	idress)						
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NOV 0 1 2021 I ALBRITTON CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 170804 7644314

AUTHORIZATION :

COST LIMIT :-

ORDER DATE: October 27, 2021

ORDER TIME : 2:48 PM

ORDER NO. : 170804-045

CUSTOMER NO: 7644314

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CHANGE OF AGENT

NAME: GREENWAY BRUNSWICK WELL LOAN

MANAGEMENT, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland -- EXT#

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.

1. N	ame of the limited liability company:	BRUNSW	/ICI	K WELL LO	OAN MANAGEMENT	, LLC	
2. (a)		((b)				
(/	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(°).	Ŋ	dailing address of limited (Note: MAY BE POST		
	9001 EAST COLONIAL DRIVE			9001 EAS	T COLONIAL DRIVE		
	ORLANDO, FL 32817		ORLANDO, FL 32817				,
	09/30/2016		L	.16000182	2957		
3.	Date of filing/registration in Florida	4.		,	Document number		
5. (a)							
J. (a)	Registered Agent and Registered Office shown on the records of	of the Florid	da D	ept, of State	:		
	LOWMAN, JR., WILLIAM R., ESQ. SHUFFIELD. LOW			2021 GET			
	Registered Office Address (MUST BE FLORIDA STREET		SS)				
	1000 LEGION PLACE, SUITE 1700					<u>``</u> ` 2	•
	·					9	
	ORLANDO	.լ _. 32801				AH	, i ; am
						ب	أعت
(b)						<u></u>	
	Enter name of NEW Registered Agent and/or NEW Registere	ed Office a	<u>d</u> dr	<u>ess</u> :			
	Corporation Service Company						
	NEW Registered Office Address:						
	1201 Hays Street						
	Tallahassee, F	L32301					
15.1				6 131	·	- , , ,	
change	limited liability company is not organized under the la c or changes are made, the Florida street address of the	iws of the e register	e Si red	ate of Flor	rida, it is hereby conf I the business office o	irmed that at f the register	iter the red
agent v	will be identical. Or, in the case of a Florida limited I	iability c	om	pany, it is	hereby confirmed that	at the change	(s)
	ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the					wise provide	ed in
	/s/: Jill Cilmi				rized Person		
Signa	ture of a member or authorized representative of a member			_	Printed or typed name of	signee	
I here provisi the obi to mer notified	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ly reflect a change in the registered office address, I d in writing of this change.					o comply with ar with and a ment is being on pany has be	th the accept g filed een
Clause	Drace Co-Kuble	Grace	E.	Kirby, Ass	st. Vice President		
- 51gnatu	re of Registered Agent						