## L17000077785

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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SEGRETARY OF STATE

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

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ACCOUNT NO. : I2000000195						
REFERENCE : 601781 7247429						
AUTHORIZATION Spelle Blands						
COST LIMIT : \$ 25.00						
ORDER DATE : April 7, 2022						
ORDER TIME : 5:33 PM						
ORDER NO. : 601781-010						
CUSTOMER NO: 7247429						
CHANGE OF AGENT						
NAME: PACES GATEWAY MANOR, LLC						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY XX PLAIN STAMPED COPY						
CONTACT PERSON: Eyliena Baker EXT#						
EXAMINER ·						

## STÀTEMENT 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:  PACES GATEV	NAY MAI	NOR, LLC			
2. (a)	2730 Cumberland Blvd	(1	2730 Cumberland Blvd			
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BON)		
	Smyrna GA 30080		Smyrna G	6A 30080		
	04/06/2017	_	L17000077	7785		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)	Registered Agent and Registered Office shown on the records of C T CORPORATION SYSTEM			2022 HAY -4 F SECRETARY O		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  1200 SOUTH PINE ISLAND ROAD					
	PLANTATION	33324		PH 1:3		
	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company	d Office ad	ldress:			
	NEW Registered Office Address:					
	1201 Hays Street			-		
	Tallahassee FI	. 32301				
change agent was/w	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited litere authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	registere ability co of the lim	ed office and ompany, it is nited liability	I the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in		
	78/ Reflect Sangeri			Authorized Person		
	ature of a member or authorized representative of a member			Printed or typed name of signee		
provis the ob to mer	by accept the appointment as registered agent and agi ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	ree to act perform d for in C hereby co	in this capa ance of my a Thapter 605, onfirm 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		
X		ace E. K	irby, Asst. V	lice President		