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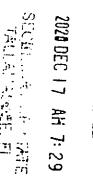
(Re	equestor's Name)								
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PICK-UP	☐ WAIT	MAIL							
(Business Entity Name)									
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O SIMMONS



CSC - WILMINGTON 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscqlobal.com

Date: December 15, 2020

Order#: 544755/102

Re: SWC JACKSONVILLE PARK ST BOTANICALS LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.
XX Return Regular Mail in the enclosed envelope.

Attn:Erika Zavala Daza c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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.	Na	ame of the limited liability company:	VILLE F	- А			LLC 	
2.	(a)	537 PARK STREET		(b) 2203 N Lois Ave M275				
	(-7	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	、	- , .	1	-	of limited liability cor BE POST OFFICE E	
		JACKSONVILLE, FL 32204	_	-	Tampa, F	L 33607		
		04/17/2017		L	17000085	5654		
3.		Date of filing/registration in Florida	4.	_		Document n	umber	
5.	(a)	C T CORPORATION SYSTEM						
J.	(4)	Registered Agent and Registered Office shown on the records of a	he Florida	a D	Dept. of State	– e:		
		1200 SOUTH PINE ISLAND ROAD		202 0				
		Registered Office Address (MUST BE FLORIDA STREET A	DDRES				e Tallene	
		PLANTATION, FL	33324					
	(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>		idr	ress:	_	7: 29	OK. W.
	Corporation Service Company							
		NEW Registered Office Address:		_		_		
		1201 Hays Street	<u></u>	_		_		
		Tallahassee, FL_	32301			_		
ch ag wa	ange ent v is/we	imited liability company is not organized under the law c or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registere bility co f the lim	ed om nite	office and ipany, it is ed liability	d the business s hereby conf y company or	s office of the regi firmed that the cha	stered nge(s)
		Xie E. Cienii	Jill (Cil	lmi, Autho	rized Person	1	
- :	Signa	ture of a member or authorized representative of a member				Printed or type	ed name of signee	
pro the to	ovisi e obl mere	by accept the appointment as registered agent and agre ons of all statules relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address. I h d in writing of this change.	ee to act perform I for in C ereby co	t ir an Ch on,	n this capa ace of my a apter 605 firm that i	acity. I furthe duties, and I o , F.S. Or, if i the limited lic	er agree to comply am familiar with a this document is b ability company ha	with the nd accept eing filed as been

Signature of Registered Agent
Grace E. Kriby, Asst. Vice President of Corporation Service Company