## L11000211830

(Req	uestor's Name)	
(Add	ress)	
(Addı	ress)	
(City)	/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
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2022 APR -5 AM 8: 31

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1 ALBRITTON

CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 584209 8276536

AUTHORIZATION : Spelle Man

COST LIMIT : \$\frac{1}{2}5.00

ORDER DATE: March 31, 2022

ORDER TIME : 3:06 PM

ORDER NO. : 584209-026

CUSTOMER NO: 8276536

## CHANGE OF AGENT

NAME: DEDICATED PENNSYLVANIA

HOLDING, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX\_ PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker -- 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. Na	ume of the limited liability company: DEDICATED PI	ENNS'	YLV	ANIA HC	OLDING, LLC			
2. (a)	1395 NW 167 STREET	(b) 1395 NW 167 STREET						
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		(*)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	MIAMI, FL 33169	<del>-</del>		MIAMI, I	FL 33169			
	10/12/2017		L	.1700021	11830			
<ul><li>3.</li><li>5. (a)</li></ul>	Date of filing/registration in Florida CHEN, STEPHANIE	4.			Document nur	nber		
. (u)	Registered Agent and Registered Office shown on the records of 1395 NW 167 STREET	the Flor	ida I	Pept, of St	ate:			
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRE	<u>(SS)</u>		<del></del>		2	
	MIAMI , FI.	33169	€			TALLAH	2022 APR -5	
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :  Corporation Service Company			ress:		Y OF STAT ASSEE, FL	AM 8: 3	n
	NEW Registered Office Address:					(T)		
	1201 Hays Street							
	Tallahassee FL	3230	1		_			
change agent w was/we	mited liability company is not organized under the law or changes are made, the Florida street address of the zill be identical. Or, in the case of a Florida limited lia- are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registe ability of the l	ered con imit	l office a pany, it ed liabili	nd the business of is hereby confinity company or a	office of th med that th	e regis ie chai	stered ige(s)
	ure of a member or authorized representative of a member	Ji	II Ci	lmi, Auth	orized Person			
Signat	ure of a member or authorized representative of a member	_		-	Printed or typed	name of sign	ec	
provision the obli to mere notified	oy accept the appointment as registered agent and agrous 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 fin writing of this change.	ee to a perfor I for in tereby	et ii mar i Ch con	n this cap ice of my papter 60 firm thai	pacity. I further duties, and I an 15, F.S. Or, if th the limited liab	agree to c n familiar v is documer ility: compo	omply with ai it is be my ha	with the nd accept ring filed s been
Signatur	e of Registered Agent E. Kirby, Asst. Vice President of Corporation Service <b>Division of Corporations • P.O. 1</b>				assee, FL 32314	ı		

FILING FEE: \$25.00