## L170002222085

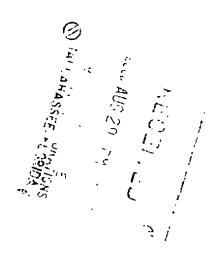
	Requestor's Name)					
	(Address)					
	(Address)					
`	(Fadire 33)					
<del></del>	C. (Ct.) (Ct.) (Ct.)					
(	City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL				
		LJ "" "				
(	Business Entity Name)					
	Document Number)					
·	,					
Certified Copies	Certificates of	Statue				
Certified Copies	Certificates of	318105				
Special Instructions to F	Filina Officer:					
Special mandenators ming officer.						
		•				
Ĺ						

Office Use Only



700414579237





S. N.J. TANTO

SEP - 1 2023

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 920729 2 8408630

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : August 4, 2023

ORDER TIME : 2:15 PM

ORDER NO. : 920729-089

CUSTOMER NO: 8408630

CHANGE OF AGENT

NAME: SUSQUEHANNA LINCOLN, LLC

CONTACT PERSON: Eyliena Baker -- EXT#

\_\_\_\_\_ CERTIFIED COPY
XX PLAIN STAMPED COPY

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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	me of the limited liability company: SUSQUEHANN	NA LINC	OLN	I, LLC	
2	(a)		í	(b)		
-	(")	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		(0/_		failing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		8633 S BAY DR		8	633 S BA	Y DR
		ORLANDO, FL 32819	_		RLANDO	), FL 32819
		10/25/2017		L1	70002220	085
3.		Date of filing/registration in Florida	4.	_	I	Document number
5.	(a)					
		Registered Agent and Registered Office shown on the records of WIDEMAN, CHRISTOPHER	the Florid	da De	pt. of State:	
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			2	
	8633 S BAY DR					2024.
		ORLANDO	32819			•
			L			•
	(b)	Enter name of NEW Registered Agent and/or NEW Registered			·	
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office a	<u>ddre</u>	<u>\$\$</u> :	. e.
		Corporation Service Company				n 7
		NEW Registered Office Address:				
		1201 Hays Street				
		Tallahassee	32301			
cha age wa	ange ent w is/we	mited liability company is not organized under the la or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited life authorized by an affirmative vote of the members cales of organization or the operating agreement of the	register ability c of the lir	red o comp mited	office and any, it is d liability	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
		istopher Wideman	Ch	risto	•	eman, Authorized Person
	_	ure of a member or authorized representative of a member				Printed or typed name of signee
pro the to	ovisie obli mere tifiea	ny accept the appointment as registered agent and aging of all statutes relative to the proper and complete gations of my position as registered agent as provide by reflect a change in the registered office address, I in writing of this change.	ree to ac perforn ed for in hereby c	zt in nanc Cha confi	this capac e of my di pter 605, rm that th	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed are limited liability company has been
		e of Registered Agent Kirby, Asst. Vice President	D 7.23	<b>17</b> - 1	r.u.t	