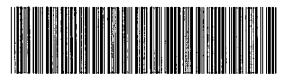
LIS 000009736

(Requestor's Name)					
(Address)					
(Address)					
(Addiess)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(======================================					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



900355944739

12/17/20--01023--004 **25.00

2021 DEC 17 AH 7: 03
SECRES STATE FATE

O SIMMONS FEB 0 2 2021



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@cscglobal.com

Date: December 15, 2020

Order#: 544755/125

Re: SWC NEW PORT RICHEY, 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	me of the limited liability company:	RICHE	Y, LLC	
2. (a)	4218 U.S. 19	(b	2203 N	Lois Ave M275
2 . (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (5.	,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	NEW PORT RICHEY, FL 34652	_ _	Tampa,	FL 33607
	01/10/2018		L1800000	9736
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	CT CORPORATION SYSTEM			
. (u)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 1200 SOUTH PINE ISLAND ROAD			702 BEC 17
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS	ì	
	PLANTATION	33324		- 1.03
(b)	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company	Office add	dress:	_
	NEW Registered Office Address:			_
	1201 Hays Street			_
	Tallahassee , FL	32301		_
change agent v was/we	imited liability company is not organized under the laws or changes are made, the Florida street address of the rwill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the li	egistere pility con the lim	d office a mpany, it ited liabili	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
	Xie E. Cienie	Jili C	Cilmi, Auth	orized Person
Signa	ture of a member or authorized representative of a member			Printed or typed name of signee
provisi the obl to mer	by accept the appointment as registered agent and agredins of all statutes relative to the proper and complete pligations of my position as registered agent as provided ely reflect a change in the registered office address, I he din writing of this change.	e to act erforma for in C ereby co	in this cap ince of my hapter 60 infirm thai	pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been

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

Drace Y-Kuby