## L18000048566

(Re	questor's Name)			
(Address)				
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(Business Entity Name)				
(Document Number)				
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SECRETARY OF STALE TALL AHASSEE, FLORID:

## 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.

I. Na	ame of the limited liability company: PW HIGHLANE	D PARK PAR	RTNERS, LLC		
2. (a)	909 N 14TH ST	(b)	909 N 14TH ST		
(α)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	NASHVILLE. TN 37206		NASHVILLE, TN 37206		
	02/23/2018		.18000048566		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	LIGHTSEY & ASSOCIATES, P.A.				
). (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
	Registered Office Address	ADDRESS)			
	WINTER PARK , F	L			
(b)	ALTON L. LIGHTSEY  Enter name of NEW Registered Agent and/or NEW Registered Office address:				
	222 W COMSTOCK AVENUE	a ome			
	NEW Registered Office Address:		NO CRE		
	SUITE 200		TAR IARS		
	WINTER PARK, F		EE FI		
change agent v was/w	imited 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 lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e registered of the limite of the limite limited liab	state of Florida, it is hereby confirmed that after the office and the business office of the registered apany, it is hereby confirmed that the change(s) and liability company or as otherwise provided in		
Signa	nture of a member or authorized representative of a member		Printed or typed name of signee		
I here provisi the obi to mer	by accept the appointment as registered agent and agions 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.	o nortorman	n this capacity. I further agree to comply with th		
Signati	ire of Registered Agent				