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(Requestor's Name)								
(Address)								
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(City/State/Zip/Phone #)								
PICK-UP WAIT MAIL								
(Business Entity Name)								
(Document Number)								
Certified Copies Certificates of Status								
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Special Instructions to Filing Officer:								
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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#: 544755/038

Re: SDC ORLANDO 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:	О ВОТА	NIC	CALS LLC	<u> </u>				
2. (a)	2203 N Lois Ave M275 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(b) 2203 N Lois Ave M275						
Z. (u)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)						
	Tampa, FL 33607	_ 	•	Tampa, FL 33607					
	05/22/2018		L	18000127	7422				
3.	Date of filing/registration in Florida C T CORPORATION SYSTEM	4.		·	Document nui	mber			
5. (a) (b)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 1200 SOUTH PINE ISLAND ROAD Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				e: _				
	PLANTATION , F	33324	_		-	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2020 DEC 17	- , 1 - , 1	
	Enter name of NEW Registered Agent and/or NEW Registered	d Office a	ıddı	<u>"ess</u> :	_		PH 6:	ا المسارة	
	Corporation Service Company		_		_		37		
	NEW Registered Office Address: 1201 Hays Street				-				
	Tallahassee, FI	12301 L			_				
change agent v was/w the arti	limited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e registe iability c of the li	red om mit	office an ipany, it is ed liabilit	d the business s hereby confir y company or	office of the	e registe ie chang	ered e(s)	
	Signature of a member or authorized representative of a member			lmi, Autho	ni, Authorized Person				
Signature of a member or authorized representative of a member					Printed or typed	l name of sign	ee		
provisi the obl to meri	by accept the appointment as registered agent and ag ions 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.	ree to ac perforn d for in hereby c	et in nar Ch con	n this capa ace of my d apter 605 firm that	acity. I further duties, and I ar 5, F.S. Or, if th the limited liab	agree to com familiar value of the familiar	omply w with and it is beir any has	ith the accept ig filed been	

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