L180002277879

(Re	questor's Name)								
(Ad	dress)								
•									
(Address)									
(City/State/Zip/Phone #)									
PICK-UP	☐ WAIT	MAIL							
_									
(Bu	siness Entity Nar	ne)							
(Do	cument Number))							
Cartified Copies	Cortificator	s of Status							
Certified Copies Certificates of Status									
Special Instructions to	Filing Officer:	_							
	_								

Office Use Only



000356202770

12/17/20--01020--023 **25.00

EEB 03 2021

S. YOUNG

920 DEC 17 PM 6:37



CSC - WILMINGTON 251 Little Falls Drive De 19808 Wilmington

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#: 544755/033

Re: SDC FT. MYERS BOTANICALS LLC

Enclosed please find:

 $\frac{XX}{XX}$ Change of Registered Agent and Office. Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

Issue Proof of Filing.

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.	Nε	ame of the limited liability company:	S BOTA	AN!	ICALS LLC	<u></u>				
2	(a)	55 IVAN ALLEN JR. BLVD NW.	((b)	2203 N L	ois Ave M275				
	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `	.~,	-	Mailing address of (Note: MAY BI		-		
		SUITE 900								
		ATLANTA, GA 30308	_		Tampa, F	L 33607				
		09/26/2018		L	18000227	879				
3.		Date of filing/registration in Florida	4.			Document nun	nber			
5.	(a)	C T CORPORATION SYSTEM								
٥.	(4)	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)	<u>ADDRES</u>	<u>(S)</u>		-				
		PLANTATION, FL	33324			-		2920		
	(b)					_	;. :.	2920 DEC 1		
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office a	<u>ddı</u>	<u>ress</u> :			1	***	
		Corporation Service Company	_			_	:	PH 6:	* 1	
		NEW Registered Office Address:						ယ္က		
		1201 Hays Street				-				
		Tallahassee, FL	32301			_				
ch ag wa	ange ent v as/w	imited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	register bility c of the lir	red on mit	l office and ipany, it is led liability	d the business of thereby confin y company or a	office of the	the regis the chan	tered ge(s)	
_		Lie E. Cienie	Jill	Ci	ilmi, Autho	rized Person				
		ture of a member or authorized representative of a member				Printed or typed				
pr the to	ovisi e obi mer	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address, I have in writing of this change.	ee to ac perforn d for in iereby c	et in nan Ch con	n this cape ace of my d apter 605 afirm that t	ncity. I further luties, and I an , F.S. Or, if th he limited liab	agree to n familian is docum ility com	comply with an ent is be pany has	with the od accept ing filed been	
		Dioen & Kindly								
Si (gnatu Grace	re of Registered Agent E. Kriby, Asst. Vice President of Corporation Service Company								

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00