L18000236952

(Requestor's Name)	
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PICK-UP WAIT MAIL	
(Business Entity Name)	12/17/20010260
(Document Number)	
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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#: 544755/096

Re: SWC GAINESVILLE BOTANICALS LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of $\frac{525}{2}$.

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. N	ame of the limited liability company: SWC GAINESV	/ILLE B	OT/	NICALS L	_LC	
2. (a)	15 SW 1ST AVE		(b)	2203 N Lo	ois Ave M275	
2 - (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(9)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	GAINESVILLE, FL 32601		-	Tampa, FL	_ 33607	
	10/15/2018		L	180002369	952	
3.	Date of filing/registration in Florida	4.	_	. [Document number	
5. (a)	C T CORPORATION SYSTEM					
	Registered Agent and Registered Office shown on the records of	the Flor	ida D	ept. of State:	:	
	1200 SOUTH PINE ISLAND ROAD					
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE	<u>(SS)</u>			
					•••	
	PLANTATION	33324	ļ		•	
	, , , , ,	L				
(b) ₋					· - /	
	Enter name of NEW Registered Agent and/or NEW Registered	d Office	addr	<u>ess</u> :	- <u>:</u>	
	Corneration Service Company				9 9	
	Corporation Service Company				0	
	NEW Registered Office Address:					
	1201 Hays Street					
	Tallahassee, FI	32301 	l 			
change agent was/w	limited 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 litere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	registe ability of the li limited	ered com imite I lia	office and pany, it is ed liability bility comp	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in	
Signa	sture of a member or authorized representative of a member				Printed or typed name of signee	
I here provis the ob- to mer	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide elv reflect a change in the registered office address, I din writing of this change.	ree to a perfori d for in hereby	ct ir man i Ch con	this capac	city. I further agree to comply with the	

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

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