## LIS 000236455

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





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12/17/20--01021--009 \*\*25.00



O SIMMONS



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@cscqlobal.com

Date: December 15, 2020

Order#: 544755/171

Re: SWC WEST PALM BEACH 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.

2. (a)	2500 S DIXIE HWY  Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		(b)	2203 N Lois Ave M275			
2. (a <sub>.</sub>			(0).	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)			
	WEST PALM BEACH, FL 33401	_	- ·	Tampa, FL 33607			_
	10/15/2018		L	18000236958			
3.	Date of filing/registration in Florida	4.		Document num	ber		
5. (a	C T CORPORATION SYSTEM					<b>~</b> ->	
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  1200 SOUTH PINE ISLAND ROAD					202 <b>0</b> DEC	
	Registered Office Address (MUST BE FLORIDA STREET	ADDR	ESS)	<del></del>	-	_	i s
/h	PLANTATION, F	3332 L_	24		7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	PH 2: 17	Party of the state
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:						
	Corporation Service Company						
	NEW Registered Office Address:						
	1201 Hays Street						
	Tallahassee, F	L3230	)1	<del></del>			
chang agent was/v	limited liability company is not organized under the lage or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited leavere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	e regis iability of the	tered com limite	office and the business of ipany, it is hereby confirmed liability company or as	ffice of the re ned that the ch	gistered nange(s)	
Xie E. Cignie			Jill Cilmi, Authorized Person				
Sign	nature of a member or authorized representative of a member	=		Printed or typed n	ame of signee		_
provi the or to me	eby accept the appointment as registered agent and ag sions of all statutes relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address, l ed in writing of this change.	gree to e perfo ed for t hereby	act ir rman in Ch v con	n this capacity. I further of the of my duties, and I am capter 605, F.S. Or, if this firm that the limited liabil	agree to comp familiar with s document is lity company i	ly with th and acce being file has been	ie Ppt Pd

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