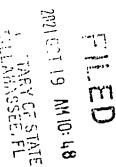
## 1800027439

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

Office Use Only



700374169097



Y SULKER OCT 2 0 2021

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT	NO.	:	120000000195

REFERENCE : 107740 4728950

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : October 14, 2021

ORDER TIME : 3:23 PM

ORDER NO. : 107740-074

CUSTOMER NO: 4728950

-----

## CHANGE OF AGENT

NAME: PALMETTO PORT CHARLOTTE-MCCALL

RD, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland -- EXT#

EXAMINER:

## 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. 1	Name of the limited liability company: PALMETTO PC	ORT CHAR	LOTTE-MCCALL RD, LLC		
2. (a	221 S. CRAWFORD STREET	(b)	P.O. BOX 1615		
<b>-</b> . (c.	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	THOMASVILLE, GA 31792		THOMASVILLE, GA 31799		
	11/27/2018		_18000274395		
<ol> <li>3.</li> <li>5. (a)</li> </ol>	Date of filing/registration in Florida  WILDER, BEDFORD	4.	Document number		
J. (6	Registered Agent and Registered Office shown on the records of 215 S. MONROE STREET SUITE 400	the Florida I	Dept. of State:		
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)			
	TALLAHASSEE, FL	32301	2021		
(b	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	PROPRIET 19 AM 10: 48			
	Corporation Service Company  NEW Registered Office Address:				
	1201 Hays Street		FLE *8		
	Tallahassee, Fil	32301			
chang agent was/v	limited liability company is not organized under the law ge or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	registered ability con of the limit	office and the business office of the registered pany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in		
	/s/ Miles Watkins		Miles Watkins, Authorized Person		
I her provi, the ot to me notifi	nature of a member or authorized representative of a member of a complete obversely accept the appointment as registered agent and agravious of all statutes relative to the proper and complete obligations of my position as registered agent as provided rely reflect a change in the registered office address. It is eat in writing of this change.	performan d for in Ch hereby con	Printed or typed name of signee at this capacity. I further agree to comply with the ce of my duties, and I am familiar with and accept apter 605, F.S. Or, if this document is being filed firm that the limited liability company has been see E. Kirby, Asst. Vice President		