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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 590463 4702973

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE: April 5, 2022

ORDER TIME : 11:37 AM

ORDER NO. : 590463-003

CUSTOMER NO: 4702973

CHANGE OF AGENT

NAME: APG RJL MANAGEMENT, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker -- 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. N	ame of the limited liability company:	AGEMEN	۱T, LI	_C	
2. (a)	923 N. PENNSYLVANIA AVENUE	(b) 923 N. PENNSYLVANIA AVENUE			
~. ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			_	address of limited liability company:
	WINTER PARK, FL 32789		WI	NTER PARK	, FL 32789
	12/26/2018		L19	000000587	
 (a) 	Date of filing/registration in Florida LEFKOWITZ, RYAN J	4.		Docu	ment number
J. (a,	Registered Agent and Registered Office shown on the records o 923 N. PENNSYLVANIA AVENUE	f the Florida	a Dept	. of State:	
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	<u>S)</u>		
	WINTER PARK, F	1			2022 APR
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address: Corporation Service Company			-5 A	
	NEW Registered Office Address:				STATE STATES
	1201 Hays Street				• • • • • • • • • • • • • • • • • • •
	Tallahassee F	L_32301			
change agent was/w	limited liability company is not organized under the la e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e registere lability co of the lin	ed off impai iited	fice and the b ny, it is hereb liability comp	ousiness office of the registered by confirmed that the change(s) pany or as otherwise provided in
	S/ Andrew Dubill	And	Andrew Dubill, Authorized Person		
I here provis the obto mer notifie	ture of a member or authorized representative of a member by accept the appointment as registered agent and agions 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. If it is a change. The content of Registered Agent Kirby, Asst. Vice President	e performe	ance	is capacity. of my duties,	and I am familiar with and accept

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