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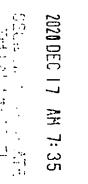
(Requestor's Name)					
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PICK-UP	☐ WAIT	MAIL			
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(Bu	isiness Entity Nar	ne)			
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CSC - WILMINGTON 251 Little Falls Drive Wilmington De 19808

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#: 544755/115

Re: SWC MERRITT ISLAND 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.

1. N	ame of the limited liability company:	T ISLAN	D LLC	
2. (a)	324 E MERRITT ISLAND CAUSEWAY	(2203 N L	ois Ave M275
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	MERRITT ISLAND, FL 32952		Tampa, F	FL 33607
	04/17/2019		L19000098	8992
 (a) 	Date of filing/registration in Florida CT CORPORATION SYSTEM	4.		Document number
J. (u	Registered Agent and Registered Office shown on the records of 1200 SOUTH PINE ISLAND ROAD	of the Florid	la Dept. of Stat	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		2020 DEC	
	PLANTATION , F	33324		
(b)	Enter name of NEW Registered Agent and/or NEW Register Corporation Service Company	ed Office a	ddress:	- 1. 1. 35 2. 1. 35
	NEW Registered Office Address:		<u> </u>	_
	1201 Hays Street			_
	Tallahassee,	FL_32301		_
chang agent was/w	limited liability company is not organized under the less or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	he registe liability c s of the li	red office an ompany, it i nited liabilit	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
	Lie E. Cienie	Jill —	Cilmi, Autho	orized Person
I hero provis the ob to me	ature of a member or authorized representative of a member eby accept the appointment as registered agent and a sions of all statutes relative to the proper and completions of my position as registered agent as providing a statute of the registered agent as providing the reflect a change in the registered office address, and in writing of this change.	gree to ac te perforn led for in I hereby c	ct in this cap nance of my Chapter 602 confirm that	Printed or typed name of signee pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
Signat Grac	ture of Registered Agent e E. Kriby, Asst. Vice President of Corporation Service Company			

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