L19000178605

(Requestor's Name)						
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10 its/15	state/Zip/Phon	o #\				
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PICK-UP	MAIT	MAIL				
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Certified Copies Certificates of Status						
Special Instructions to Fili	ng Officer:					
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CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 336627 8056101

Syptem

COST LIMIT :

AUTHORIZATION

ORDER DATE : December 17, 2021

ORDER TIME : 5:40 PM

ORDER NO. : 336627-008

CUSTOMER NO: 8056101

CHANGE OF AGENT

NAME: HFB FIRST PLACE, 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.

I. Na	une of the limited liability company: HFB FIRST PL	ACE, LLO) 			
			,			
X.,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited (Note: MAY BE POST	liability comp	pany:
	605 COMMONWEALTH AVE		ORLANDO, FL 32803			
	ORLANDO, FL 32803					
	07/22/2019		L19000178	8605		
3.	Date of filing/registration in Florida	4.		Document number		-
5. (a)						
J. (a)	Registered Agent and Registered Office shown on the records of OROSZ, ANDREW J	of the Florida	a Dept. of State	- e:		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	<u></u>	-		
	605 COMMONWEALTH AVE		_		2021	
	ORLANDO , F	L 32803		-	71.	
				~	. 20	,
(b)				-		;
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ed Office ad	<u>dress</u> :		21 H4	, 1
	Corporation Service Company				<u> </u>	
	NEW Registered Office Address:				_	
	1201 Hays Street		<u>-</u>	_		
	Tallahassee , F	L_32301		_		
change agent was/we the arti	imited liability company is not organized under the later or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited later authorized by an affirmative vote of the members cles of organization or the operating agreement of the Franco Tenerelli	e registere lability co of the lim e limited l	ed office and impany, it is nited liability iability com	d the business office of shereby confirmed that y company or as other	of the regist at the chang	ered ge(s)
	ture of a member or authorized representative of a member	- 112	nco renerei	Printed or typed name of	signee	
I herel provisi the obli to mere	by accept the appointment as registered agent and agens of all statutes relative to the proper and complete igations of my position as registered agent as providely reflect a change in the registered office address, It in writing of this change.	e performe ed for in (hereby co	ance of my o Thapter 605 Onfirm that t	acity. I further agree a luties, and I am famili , F.S. Or, if this docu the limited liability co	to comply w	vith the l accept ng filed been
Signatu	Two L. Kubly re of Registered Agent	Grace E	. NIFDY, ASS	t. Vice President		