## 120000045051

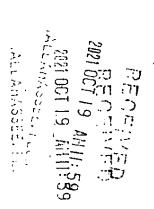
<u> </u>						
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(Business Entity Name)						
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2021 OCT 19 AH 8: 4



CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 107740 4728950

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE: October 14, 2021

ORDER TIME : 3:19 PM

ORDER NO. : 107740-064

CUSTOMER NO: 4728950

## CHANGE OF AGENT

NAME: PALMETTO MUSCLE

SHOALS-WOODWARD AVE, 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.	Na	me of the limited liability company: PALMETTO MUS	SCLE S	H	OALS-WOO	ODWARD AVE, LLC	
2.	(a)	221 S. CRAWFORD STREET	(1	b)	P.O. BOX	1615	
	(*-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ ``	•-,		ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		THOMASVILLE, GA 31792	_		THOMASV	/ILLE, GA 31799	
		02/07/2020	_	l	_200000450	051	
3.		Date of filing/registration in Florida	4.		Ĺ	Document number	
5.	(a)	WILDER, BEDFORD					
		Registered Agent and Registered Office shown on the records of the 215 S. MONROE STREET SUITE 400	he Florid	a I	Dept. of State:		
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)			2021 OCT CACRET	
		TALLAHASSEE . FL	32301	_			
	(b)	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company	Office ad	ldr	dress:		
		NEW Registered Office Address:			<del></del>		
		1201 Hays Street					
		Tallahassee, FL_	32301				
cha age was	nge nt w s/we	mited liability company is not organized under the laws or changes are made, the Florida street address of the raill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of these of organization or the operating agreement of the liab	egister oility co `the lin	ed om nite	office and pany, it is hed liability	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in	
/s/ Miles Watkins			Mile	Miles Watkins Authorized Person			
I h pro the to n	ereh visio obli nere ifiza	ure of a member or authorized representative of a member by accept the appointment as registered agent and agre posses of all statutes relative to the proper and complete pations of my position as registered agent as provided by reflect a change in the registered office address. I he in writing of this change.	erform for in ( ereby co	an Th on,	this capac ce of my du apter 605. I firm that th	Printed or typed name of signee with the vity. I further agree to comply with the vies, and I am familiar with and accept F.S. Or, if this document is being filed a limited liability company has been Asst. Vice President	

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