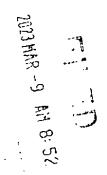
## 20000061579

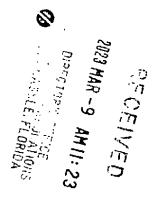
(Requ	iestor's Name)	)
(Addr	ess)	
(Addr	ess)	
(City/s	State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Na	ime)
(Docu	ament Number	()
Certified Copies	Certificate	es of Status
Special Instructions to Fi	ling Officer;	

Office Use Only



700402122797





A. BUTLER MAR 10 2023

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE : 556913 8397199
AUTHORIZATION: (Soul Blend)
COST LIMIT : \$\sqrt{2500}
ORDER DATE: March 9, 2023
ORDER TIME : 10:41 AM
ORDER NO. : 556913-005
CUSTOMER NO: 8397199
CHANGE OF AGENT
NAME: WOODPOND MANOR SOUTH 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.

2. (a)	Principal office address of limited liability company:	(b)	
	(Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Wellington, FL 33414	Wellingto	n, FL 33414
	February 25, 2020	L2000006	1579
3.	Date of filing/registration in Florida	4.	Document number
5. (a)			
	Registered Agent and Registered Office shown on the records Kamine, Kathleen J.	of the Florida Dept. of Stat	e:
	Registered Office Address (MUST BE FLORIDA STREE 12035 Polo Club Road	T ADDRESS)	2022
	Wellington	33414	7023 MAR -
	Enter name of NEW Registered Agent and/or NEW Register  Corporation Service Company  NEW Registered Office Address:  1201 Hays Street	ed Office address.	e: 5%
	Tallahassee	32301	-
rnange agent w was/we	mited liability company is not organized under the la or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited la re authorized by an affirmative vote of the members cles of organization or the operating agreement of the	aws of the State of Flone registered office and liability company, it is of the limited liability	I the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
/s/	757 Ivanneen reannie		ne, Authorized Person
I hereb provisio he obli o mere	ure of a member or authorized representative of a member by accept the appointment as registered agent and as answer of all statutes relative to the proper and complete gations of my position as registered agent as providity reflect a change in the registered office address, It in writing of this change.	gree to act in this capa e performance of my a ed for in Chapter 605, hereby confirm that t	Printed or typed name of signee acity. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed the limited liability company has been

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