

## 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'rincipal office address of limited liability company:         Mailing address of limited liability company:		
	Principal office address of limited liability company: ( <i>Note: MUST BE STREET ADDRESS</i> )		Mailing address of limited liability company: ( <u>Note: MAY BE POST OFFICE BON</u> )
	643 SW 4th Ave Suite 210	E	543 SW 4th Ave Suite 210
	Gainesville, FL 32601		Gainesville, FL 32601
	07/14/2020	L2	20000203292
	Date of filing/registration in Florida	4.	Document number
(a)			
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State		ept. of State:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		
	643 SW 4th Ave Suite 210		
	Gainesville Fl	32601	
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office addre	<u>\$\$</u> ;
	C T Corporation System		
	<u>NEW</u> Registered Office Address:		

 was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

 Matche i, tice, r.
 Malcolm C. King, Jr.

 Stgnatule of a member or authorized representative of a member
 Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent Laura Broderick - Asst. Secretary

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