L21000108086

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T I I

CORPORATION SERVICE COMPANY

1201 Hays Street

.

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 457080 5028492

AUTHORIZATION

ORDER DATE: February 3, 2022

ORDER TIME : 9:31 AM

ORDER NO. : 457080-005

CUSTOMER NO: 5028492

CHANGE OF AGENT

NAME: SWAMBO LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER:

COVER LETTER

Division of Corporations	
SWAMBOLLC SUBJECT:	
	f Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office (Change and fee(s) are submitted for filing.
Please return all correspondence concerning this m	atter to the following:
ERIC P BEVERIDGE	
Name of Person	<u> </u>
ANTHOS USA, INC.	
Firm/Company	
1001 AVENUE OF THE AMERICAS, SUITE 1501	
Address	
NEW YORK, NY 10018	
City/State and Zip Code	
E.BEVERIDGE@ANTHOS. NET	
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, plea	ase call:
ANN FEHLING	516 884-3084
Name of Person	Area Code & Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, Fl. 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amo	ount:
□ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

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.

l. Na	ame of the timited fiability company:	,					
2. (д)	SWAMBOLLC		(b) SWAMBO LLC, C/O ANTHOS USA, INC.				
(+)	Principal office address of limited fiability company: (Note: MUST BE STREET ADDRESS) 4475 N OCEAN BOULEVARD, #304		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 1001 AVENUE OF THE AMERICAS, STE 1501				
	DELRAY BEACH, FL 33483 MARCH 5, 2021		NEW YORK, NY 10018				
		L21000108086					
3.	Date of filing/registration in Florida	- 4.		Document numb	er		
5. (a)							
). (a)	Registered Agent and Registered Office shown on the records of	 Tthe Flo	rida Dept. of St	alc:			
	MACMILLAN & STANLEY, PLLC						
	Registered Office Address (MUST BE FLORIDA STREET	ADDRI	<u> </u>	_			
	33 NE 4TH AVENUE						
	DELRAY BEACH , FI	3348	3				
			<u> </u>	_		29;	
(b)						2022 FEB	
	Litter name of NLW Registered Agent and/or NEW Registerer	d Office	address:		24		
	Corporation Service Company				AKY 0 VHASS	<u>ئ</u>	,
	NIW Registered Office Address:			_	OF S	3	
	1201 Hays Street			. 	STAI	<u>.:</u>	O
	Tallahassee F1	3230	1		iri	4	
	٠, ٢١	*	. .				
:hange igent v vas/we he arti	imited liability company is not organized under the lar or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	regist ability of the l fimite	ered office at company, it imited liabili	nd the business offi is hereby confirme ity company or as c mpany.	ice of the r d that the	register change	ed (s)
Signat	ture of a member or authorized representative of a member	 -		Printed or typed nam	ne of sience		- -
I herei provisi he obl o mere iotifico	by accept the appointment as registered agent and agreement of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address. It is writing of this change.	reg to a perfor d for it hereby	net in this cap mance of my i Chapter 60 confirm that	pacity. I harther ay	ree to con	iply wii Ir and e 's heine Aas be	th the secept filed sen
	re of Registered Agent						