## 12100161441

(Re	equestor's Name)				
(Ad	ldress)				
(Ad	ldress)				
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Do	ocument Number)				
Certified Copies	_ Certificates	of Status			
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Y SULKER

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallbassee FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195						
REFERENCE : 170804 7644314						
AUTHORIZATION :						
COST LIMIT : \$ 25.00						
ORDER DATE: October 27, 2021						
ORDER TIME : 2:41 PM						
ORDER NO. : 170804-031						
CUSTOMER NO: 7644314						
CHANGE OF AGENT						
NAME: FRANKLIN KMA LAND, LLC						
MARIE. PRAMEDIN WAS DAND, DDC						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY XX PLAIN STAMPED COPY						
ZMIII DIBILD COLL						
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. N	lame of the limited liability company: FRANKLIN KN	MA LANE	), L	.LC	
2. (a)					
` '	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		` ,		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	9001 E. COLONIAL DRIVE			9001 E. (	COLONIAL DRIVE
	ORLANDO, FL 32817			ORLAND	OO, FL 32817
	04/15/2021		I	_2100016	1441
3.	Date of filing/registration in Florida	4.	_		Document number
5. (a	)				
<i>J.</i> (	Registered Agent and Registered Office shown on the records of WILLIAM R. LOWMAN JR. SHUFFIELD, LOWN				
	Registered Office Address (MUST BE FLORIDA STREE 1000 LEGION PLACE, SUITE 1700	T ADDRE	SS)		_
	ORLANDO	32801	1		792)
					2021 CCT 29 TALLAHA
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	ress:	AHAS		
	Corporation Service Company				ASSEE, FL
	NEW Registered Office Address:				FL
	1201 Hays Street				 F11
	Tallahassee, F	FL_32301	l		_
chang agent was/w	limited liability company is not organized under the le or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	aws of the ne registe liability of s of the li	ne S erec con imi	l office an npany, it i ted liabilit	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
	/s/: Jill Cilmi	Jil	II C	ilmi, Autho	orized Person
Sign	ature of a member or authorized representative of a member	-			Printed or typed name of signee
provis the ob to mer	by accept the appointment as registered agent and a ions of all statutes relative to the proper and complet ligations of my position as registered agent as provid ely reflect a change in the registered office address, a d in writing of this change.	gree to a le perfori led for in I herehy	ct i mai (C) cor	n this cap ace of my apter 603 afirm that	acity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
ত:	Drace C-Kuble	Grace	e E.	Kirby, A	sst. Vice President
Signati	are of Registered Agent				