1000235474

(Requestor's Name)								
(Address)								
(Address)								
(Modress)								
(City/State/Zip/Phone #)								
PICK-UP WAIT MAIL								
(Dusines Fast, Name)								
(Business Entity Name)								
(Document Number)								
Certified Copies Certificates of Status								
· · · · · · · · · · · · · · · · · · ·								
Special Instructions to Filing Officer:								

Office Use Only



200417132052

2023 NOV 17 AM 11: 23

CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

REFERENCE : , 1,349,717 8429939

AUTHORIZATION

COST LIMIT : \$ 25.00

ORDER DATE: November 16, 2023

ORDER TIME : 11:28 AM

ORDER NO. : 134971-007

CUSTOMER NO: 8429939

CHANGE OF AGENT

NAME: HC OSWEGO LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland-sorenson -- 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. Floridu 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	ame of the limited liability company: HC OSWEGO LL	.C						
2	(a)	301 E LAS OLAS BLVD.		(b) 3	01 E LA	S OLAS BLVD.			_
٠.	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(1)	,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) DOR			
		2ND FLOOR		2	ND FLO				
		FORT LAUDERDALE, FL 33301	_	F	ORT LA	UDERDALE, FL 3330)1		
		05/20/2021		L2	1000235	5474			
3.		Date of filing/registration in Florida	4.			Document number			
5.	(a)	FRANK, WEINBERG & BLACK, P.L.							
	(**)	Registered Agent and Registered Office shown on the records of the	pt, of State	- e:					
		ATTN: ANDREW D. LEVY, ESQ.					,	20	
		Registered Office Address (MUST BE FLORIDA STREET AL				- - - -	-4.11 	23 N	en ger
		1875 NW CORPORATE BLVD. STE 100				_ _		2023 NOV 17	Fig.
		BOCA RATON EL C	33431	1					d Section
						- 8		MH 11: 23	
	(b)					_	Ti. Mili		O
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>)ffice :	addre:	<u>ss</u> :		<u>ائي</u> -	23	
		Corporation Service Company							
		NEW Registered Office Address:		•		_			
		1201 Hays Street				-			
		Tallahassee FL 3	32301	I					
cha age wa	inge ent w s/we	mited liability company is not organized under the laws or changes are made, the Florida street address of the rivill be identical. Or, in the case of a Florida limited liability and affirmative vote of the members of cles of organization or the operating agreement of the liability and the street authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liability and the street authorized by an affirmative vote of the members of the liability and the street authorized by an affirmative vote of the members of the liability and the street authorized by an affirmative vote of the members of the liability and the street authorized by an affirmative vote of the members of the liability and the street authorized by an affirmative vote of the members of the liability and the street authorized by an affirmative vote of the members of the liability and the street authorized by an affirmative vote of the members of the liability and the street authorized by an affirmative vote of the members of the liability and the street authorized by an affirmative vote of the members of the liability and the street authorized by an affirmative vote of the members of the liability and the street authorized by an affirmative vote of the members of the liability and the street authorized by an affirmative vote of the members of the liability and the street authorized by an affirmative vote of the liability and the street authorized by an affirmative vote of the liability and the street authorized by an affirmative vote of the liability and the street authorized by an affirmative vote of the liability and the street authorized by an affirmative vote of the liability and the street authorized by an affirmative vote of the liability and the lia	egiste sility (the li	ered c comp imited f liab	ffice and any, it is I liability illing the first transfer in the	d the business office of shereby confirmed the y company or as other apany.	of the at the rwise	registe chang	ered ,e(s)
S	ignat	ure of a member of authorized representative of a member	i, Authorized Person Printed or typed name of						
I h pro the to i not	erel ovisio obli nere ified	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ilv reflect a change in the registered office address. I he is writing of this change.	e to ac erfori for in reby	ct in i manci Chaj confi	this capa e of my a oter 605, rm that t	acity. I further agree	to cor	nole u	rith the l accept ig filed heen
		E. Kirby, Asst. Vice President Division of Corporations P.O. Be	ox 63	27● 7	Γallahas	ssee, FL 32314			

FILING FEE: \$25.00

INHS18 (2/14)