Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L21000338568

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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : CLARK PARTINGTON
Account Number : I20140000059
Phone : (850)650-3304
Fax Number : (850)650-3305

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: klipham@clarkpartington.com

2022 MAR 29 PM 12:47

LLC REGISTERED AGENT CHANGE
3601 DAVIS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	$25.00

2022 MAR 29 PM 1:39

APPROVED AND FILED

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 3691 DAVIS, LLC
Name of 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 matter to the following:

AMY P. SLAMAN, ESQ.
Name of Person

CLARK PARTINGTON
Firm/Company

4100 LEGENDARY DRIVE, SUITE 200
Address

DESTIN, FL 32541
City/State and Zip Code

ASLAMAN@CLARKPARTINGTON.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KATHY LIPHAM at (850) 650-3304
Name of Person — Area Code & Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☒ $25 Filing Fee ☐ $55 Filing Fee & Certified Copy

INHS18 (2/14)

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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. Name of the limited liability company: 3601 DAVIS, LLC

2. (a) 3601 N. DAVIS HWY
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

PENSACOLA, FL 32503

(b)
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

3. 07/26/2021
Date of filing/registration in Florida

4. L21000338568
Document number

5. (a) JONES WALKER LLP C/O CHRISTOPHER HINSLEY
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

CHRISTOPHER M. HINSLEY

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

201 S. BISCAYNE BLVD 2600

MIAMI, FL 33130

(b) AMY P. SLAMAN, ESQ
Enter name of NEW Registered Agent and/or NEW Registered Office address:

4100 LEGENDARY DRIVE
NEW Registered Office Address:
SUITE 200

DESTIN, FL 32541

APPROVED AND FILED
2022 MAR 29 PM 1:39
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) 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.

Signature of a member or authorized representative of a member

PATRICK S. HEROMAN
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

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