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ida Department of State

Division of Corporations Electronic Filing Cover Sheet

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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

2. (a)	1051 WINDERLEY PLACE, SUITE 100		(b) 1051 WINDERLEY PLACE, SUITE 100 Mailing address of limited liability company:					
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(-/			of limited liabi BE POST OF I		
	MAITLAND, FL 32571		-	MAITLA	ND, FL 32571			
	07/30/2021		L.	21000347		_		
3.	Date of filing/registration in Florida	4.	_		Document n	umber		
5. (a)	INCORPORATING SERVICES, LTD.							
, -	Registered Agent and Registered Office shown on the records of	f the Flor	ida I	Pept, of Sta	de:			
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE	<u>(SS)</u>					
	1540 GLENWAY DRIVE							
	TALLAHASSEE, F	L_32301			_	W Zoo	20.	
(b)	C T Corporation System						2021 DEC	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:				CTL OF STATE LAHASSEE, FLORID	<u>6</u>	FILED	
	NEW Registered Office Address:				_	10.7. 71.9.7	=	
	1200 South Pine Island Road				_	NIE RIDA	AM II: 04	
	Plantation, F	L33324			_			
the cha agent v was/wa	imited liability company is not organized under the lange or changes are made, the Florida street address ovill be identical. Or, in the case of a Florida limited irrespectively by an affirmative vote of the members into of organization or the operating agreement of the member authorized representative of a member.	iws of the re liability of the l ec limite	he S gist con imit d lia	ered offici pany, it ed liabili ability co	ce and the busi is hereby conf ity company or	iness office irmed that t r as otherwis	of the he cha se prov	registerec nge(s)
I here provisi the obj to mer	by accept the appointment as registered agent and a ions of all statutes relative to the proper and complet igations of my position as registered agent as provicely reflect a change in the registered office address.	gree to c le perfoi led for i l hereby	uct i rma n C.	n this cap nce of my hapter 60 nfirm that	nacity I furth	er avree to e	compl	v with the ind accep eing filed as been
notijie. By:	d in writing of this change. An indian pouls				Secretary			