L21000390409

(Re	equestor's Name)	 			
(Ac	ddress)				
(Ac	ddress)				
(Ci	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Ві	usiness Entity Nam	ne)			
(Do	ocument Number)				
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RARCICHS

APR 0 6 2022 I ALBRITTON CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 5842091 8276536

AUTHORIZATION : STANKE CONTROL

COST LIMIT : \$ 25.00

ORDER DATE: March 31, 2022

ORDER TIME : 2:59 PM

ORDER NO. : 584209-015

CUSTOMER NO: 8276536

CHANGE OF AGENT

NAME: DEDICATED ARIZONA HOLDING, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker -- 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.

2. (a)	1395 NW 167 STREET	(b) 1395 N	NW 167 STREET			
· (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	o,	Mailing address o (Note: MAY B			-
	MIAMI, FL 33169	-	MIAMI,	, FL 33169	-		
	09/01/2021		L210003	390409			
5. 5. (a)	Date of filing/registration in Florida CHANDLER, KATHRYN	4.		Document nur	nber		
(,	Registered Agent and Registered Office shown on the records of the 1395 NW 167 STREET	e Floric	fa Dept. of S	State:			
	Registered Office Address (MUST BE FLORIDA STREET A	DDRES	<u>(S)</u>		Ž.	2022 A	
	MIAMI . FL	33169		_	LAHAS	022 APR -5	
(b) _	Enter name of NEW Registered Agent and/or NEW Registered Office address: Corporation Service Company			_	OF STATE	AM 8: 32	
	NEW Registered Office Address:						
	1201 Hays Street						
	Tallahassee, FL_	32301					
hange gent w vas/we he artic	mited liability company is not organized under the laws or changes are made, the Florida street address of the relil be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liable of a member or authorized representative of a member	egister oility c the lin mited	ed office a ompany, i nited liabi liability co	and the business of this hereby confinition of a company or a company. In the company of the co	office of the med that the as otherwise	registe chang provid	ered e(s)
				Printed or typed	_		
hand	y accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p gations of my position as registered agent as provided by reflect a change in the registered office address. I he	e to ac	t in this co	apacity. I further	agree to co	nply w	ith the

Signature of Registered Agent

Grace E. Kirby. Asst. Vice President of Corporation Service Company