## L2100050671

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



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RECEIVED

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 603433 8374304

AUTHORIZATION :

COST LIMIT : \$(25.00

ORDER DATE : April 8, 2022

ORDER TIME : 1:07 PM

ORDER NO. : 603433-028

CUSTOMER NO: 8374304

\_\_\_\_\_\_

## CHANGE OF AGENT

NAME: 134 NAUTILUS DRIVE LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland -- EXT#

## 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.

(a)	18 E. 4TH STREET, SUITE 902 (b) 18		BE. 4TH STREET, SUITE 902	
(/	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	CINCINNATI, OH 45202		CINCINNATI, OH 45202	
	12/01/2021	L2	1000506719	
	Date of filing/registration in Florida	4.	Document number	
(a)	C T CORPORATION SYSTEM			
(4)	Registered Agent and Registered Office shown on the records	of the Florida De	pt. of State:	
(b) _	1200 SOUTH PINE ISLAND ROAD			
	Registered Office Address (MUST BE FLORIDA STREE	ET ADDRESS)	2022 API2	
	PLANTATION	FL_33324		
			Tg.	
	Enter name of NEW Registered Agent and/or NEW Registe	red Office addre	<u></u>	
	Corporation Service Company		<del>5</del> 8	
	NEW Registered Office Address:			
	1201 Hays Street			
	Tallahassee	FL 32301		
nge nt w /we	mited liability company is not organized under the or changes are made, the Florida street address of trill be identical. Or, in the case of a Florida limited re authorized by an affirmative vote of the member cles of organization or the operating agreement of the	he registered o liability comp is of the limited	office and the business office of the registered any, it is hereby confirmed that the change(s) I liability company or as otherwise provided it	
	are of a member or authorized representative of a member	Jill Ciln	ni, Authorized Person	

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

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