Division of Corporations

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(((H24000160440 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FISHER, TOUSEY, LEAS & BALL

Account Number : I19990000021 Phone : (904)356-2600 Fax Number : (904)355-0233

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

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LLC REGISTERED AGENT CHANGE MOFFITT, LLC

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MAY 08 2024 K. Brumble) To:

H240001604403

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. Na	ame of the limited liability company: MOFFITT, LLC			
2. (a)	1351 13TH AVENUE SOUTH, SUITE 130		b) 1351 13T	THAVENUE SOUTH, SUITE 130
- (")	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	· \	· · ·	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	JACKSONVILLE BEACH, FL 32250	_	JACKSONVILLE BEACH, FL 32250	
	12/14/2021		L210005250	6673
3.	Date of filing/registration in Florida	_ 4.		Document number
5. (a)	TOUSEY, LEAS & BALL, P.A.			
. ,	Registered Agent and Registered Office shown on the records of 501 RIVERSIDE AVENUE, SUITE 600	ie:		
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRES	<u></u>	2024 115.7 - 7
(b)	JACKSONVILLE FI	32202	-	
	FT CORPORATE SERVICES, LLC			
(***	Enter name of NEW Registered Agent and/or NEW Registered	k saillO l	ddress:	
	501 RIVERSIDE AVENUE, SUITE 700			
	NEW Registered Office Address:	<u> </u>		-
	JACKSONVILLE, FL	32202		_
change agent v was/we	imited liability company is not organized under the lay or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	register ability c of the lir	ed office an ompany, it is nited liabilit	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
	in Manged	Au	thorized Repr	
l herei provisi the ohl to mere	ture of a member or authorized representative of a member by accept the appointment as registered agent and agr ions of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I I f in writing of this change.	ree to ac perform d for in hereby c	t in this capt ance of my t Chapter 605 onfirm that	Primed or typed name of signee pacity. I further agree to comply with the duties, and I am familiar with and acces 5, F.S. Or, if this document is being file the limited liability company has been
	in the age of the contract of			
Signatu	re of Registered Agent			

INHS18 (2/14)