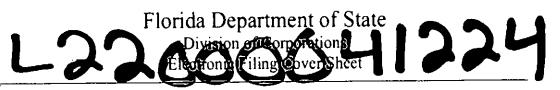
Division of Corporations



→ 18506176383

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000154355 3)))



H220001543553ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

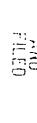
Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

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

Email Address:\_

## LLC REGISTERED AGENT CHANGE **CPI LEESBURG I LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00



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Help

INHS18 (2/14)

15129570210

	COVER LETTER .						
TO: Registration Section Division of Corporations							
SUBJECT: CPI LEESBURG	I LLC						
	e of Limited Liability Company						
Dear Sir or Madam:							
The enclosed Registered Agent/Registered Office	ce Change and fee(s) are submitted for filing.						
Please return all correspondence concerning this	s matter to the following:						
Mary Castillo							
Name of Person							
Registered Agent Solutions, Inc.							
Firm/Company	<del></del>						
Corporate Center One, 5301 Southwes	t Pkwy, Ste 400						
Address							
Austin, TX 78735							
City/State and Zip Code							
E-mail address: (to be used for future ann	ual report notification)						
For further information concerning this matter,	please call:						
Mary Castillo	888 705-7274						
Name of Person	Area Code & Daytime Telephone Number						
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Area Code & Daytime Telephone Number  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314						
Enclosed is a check for the following	amount:						
□ \$25 Filing Fee	S55 Filing Fee & Certified Copy						

15129570210

## 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.

Name of the limited liability company	CPI LEESB	URG	ILLC			
2. (a) 195 NORTH STREET		(b) 195 NORTH STREET				
Principal office address of limited (Note: MUST BE STREET	•	- ( / /	(	Note: MAY BE	limited liability corr	
SUITE 100		SUITE 100				
TETERBORO, NJ 07	068		TETER	BORO, I	NJ 07068	
1/21/2022		L	.220000	)41224		
3. Date of filing/registration	in Florida	4.		Ocument nun	nber	
5. (a) BUSINESS FILINGS	INCORPORA	ATED				
Registered Agent and Registered Office sh	nown on the records of th	e Florida U	Dept. of State:			
1200 SOUTH PINE IS	SLAND ROAI	D				
Registered Office Address (MUST BE	FLORIDA STREET AL	DDRESS)				
PLANTATION	, FL	33324				
(b) Registered Agent Sol	utions, Inc				2022 APR 28	٦,,
Enter name of NEW Registered Agent as	nd/or NEW Registered (	Office addi	æi:		PR 21	
155 Office Plaza Dr.						E E E
NEW Registered Office Address:					至至	
Suite A					8: U8	) ) )
Tallahassee	, FL_	32301				
If the limited liability company is not orgithe change or changes are made, the Floriagent will be identical. Or, in the case of was/were authorized by an affirmative vo the articles of organization or the operation	da street address of ( a Florida limited lia te of the members of	the regist bility cor I the limi	ered office npany, it is ted liability	and the busin hereby confu company or:	rmed that the cha	negistered
s∕ Michael Hanson			nael Hans	on	Authorized	Signer
Signature of a member or authorized representat					I name of signee	
I hereby accept the appointment as regis provisions of all statutes relative to the pi the obligations of my position as register to merely reflect a change in the register notified in writing of this change.						

Mackenzie Hart, Asst. Secretary

Signature of Registered Agent