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CORPORATION SERVICE COMPANY

CONTACT PERSON: Eyliena Baker -- EXT#

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

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ORDER :	DATE :	March	17, 20	23					
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CUSTOM	ER NO:	787	2917						
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CHANGE OF AGENT									
	NAME:	TREA	ATMENT	PROPE	ERTY	, LLC			
PLEASE	RETURN	THE FO	LLOWIN	G AS E	PROC	F OF FILIN	1G :		
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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.

1. N	ame of the limited liability company: TREATMENT I	PROPER	RTY, LLC			
2. (a)		(b)			
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	, <u> </u>	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	2328 10TH AVE N, SUITE 300		2328 10TH	HAVE N. SUITE 300		
	LAKE WORTH BEACH,, FL 33461		LAKE WO	RTH BEACH,, FL 334	61	
	03/30/2022		L22000129	696		
3.	Date of filing/registration in Florida	4.	1	Document number		
5. (a)	Registered Agent and Registered Office shown on the records of ALAN I ARMOUR II Registered Office Address (MUST BE FLORIDA STREET)			:	20	
	3001 PGA BOULEVARD, SUITE 305				2023 M/.R	1
	PALM BEACH GARDENS, F	33410			i.R 20	<i>ž</i>
(b)	Enter name of NEW Registered Agent and/or NEW Registered	d Office a	ddress:		VIN 10: 00	. ! فعد
	Corporation Service Company			:	0.0	
	NEW Registered Office Address:					
	1201 Hays Street					
	Tallahassee, Fi	22301				
change agent was/w	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liter authorized by an affirmative vote of the members icles of organization or the operating agreement of the	register ability c of the lir	red office and ompany, it is nited liability	the business office of hereby confirmed that company or as otherw	the registere the change(ed s)
	y Fischer-Persson	Ju		rsson, Authorized Per		
Sions	ture of a member or authorized representative of a member			Printed or typed name of si	ignee	

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the 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 on behalf of Corporation Service Company