## L22000433669

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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

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	ACCOUNT NO.	:	120000000	195
	REFERENCE	:	920729	8408630
	AUTHORIZATION	:	115	all man
	COST LIMIT	:	\$ 25.00	L' MAR -
ORDER DATE :	August 4, 2023			
ORDER TIME :	2:06 PM			
ORDER NO. :	920729-037			
CUSTOMER NO:	8408630			

**n** (4-

## CHANGE OF AGENT

NAME: 901 CORNWALL REALTY, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPYXXPLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER:

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## 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)		(3	b)	
	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)		М	ailing address of limited liability company (Note: MAY BE POST OFFICE BOX)
	8633 SOUTH BAY DRIVE		8633 SOU	TH BAY DRIVE
	ORLANDO, FL 32819		ORLANDC	9, FL 32819
	10/07/2022		L220004336	69
	Date of filing/registration in Florida	4.	I	Document number
(a)	ATTN:TUCKER THONI, ESQ.			
(a)	Registered Agent and Registered Office shown on the recor	ds of the Florid	a Dept. of State:	
	GRAYROBINSON, P.A.			
	Registered Office Address <u>(MUST BE FLORIDA STR.</u> 301 E. PINE STREET, SUITE 1400	<u>EET ADDRES.</u>	<u>S)</u>	
	ORLANDO	. FL_32801		~
(h)	ORLANDO			2025 .
(b)				2025
(b)	ORLANDO			t.,
(b)	ORLANDO Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regis</u>			r
(b)	ORLANDO Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regis</u> Corporation Service Company			t.,

was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

/S/ Christopher Wideman

Christopher Wideman, Authorized Person

Signature of a member or authorized representative of a member

Printed or typed name of signee

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.

,ωO MC . Signature of Registered Agent

Grace E. Kirby, Asst. Vice President

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 FILING FEE: \$25.00