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LLC REGISTERED AGENT CHANGE SIX PINES PENSACOLA, LLC

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T. LE Help

IAN 26 2023

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: Six	Pines Pensaco	la, LLC	,		
2. (a)	1717 WOODSTEAD COURT, STE 207 THE WOODLANDS, TX. 7 Principal office address of limited liability company:	7380 (b)_	1717 WO	ODSTEAD COURT, STE 207 TE		
	(Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company, (Note: MAY BE POST OFFICE BOX)		
	11/00/0000					
	!1/29/2022			L22000503605		
3 .	Date of filing/registration in Florida	4.		Document number		
5. (a)	Christine Keelms					
	Registered Agent and Registered Office shown on the records	of the Florida De	pt. of Su	nie:		
	Registered Office Address (MUST BE FLORIDA STREE	Talddress)				
	1200 South Pine Island Road,			**	2023	
	Plantation	FL_33324		_	JAN	
(b)	C T Corporation System				125	=,
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	red Office addre	16.	- -	P	<u> </u>
					<u>ව</u>	
	NEW Registered Office Address.			- <u>\$</u> :	է2	
	1200 South Pine Island Road			_		
	Plantation	p, 33324				
	Plantation	FL				
the cha	imited liability company is not organized under the inge or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited	of the register	ed offic	ce and the business office	of the reg	gistered
was/we	ere authorized by an affirmative vote of the member cles of organization or the operating agreement of t	s of the limited he limited liab	d liabili sility co	ty company or as otherwi mpany.	ise provide	ed in
فظيمه			32	Printed or typed name of sig		
	ure of secumber or authorized representative of a member					
the obl	by accept the appointment as registered agent and cons of all statutes relative to the proper and completigations of my position as registered agent as providive reflect a change in the registered office address, I in writing of this change. Sandta Zwijack.	igree to act in ite performand ded for in Cha I hereby confi	this cap te of my upter 60 irm thai	pacity. I further agree to eduties, and I am familia 15, F.S. Or, if this docum t the limited liability com	comply w r with and ent is bein pany has l	ith the accept ig filed been
By:	C T Corporation System Assistant Secreetary	المهارة المطالبة				
<u> </u>	re of Registered Agent					