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SECRETARIO SECULIARIO DE SELETO DE SECULIARIO DE SELETO DE SELETO

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

|--|

REFERENCE : 554965

AUTHORIZATION :

COST LIMIT : \$ 25.0

·

ORDER DATE : July 17, 2024

ORDER TIME : 10:05 AM

ORDER NO. : 554965-049

CUSTOMER NO: 8441010

CHANGE OF AGENT

NAME: AH SAN FRANCISCO, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Shauna Godbolt -- EXT#

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: AH SAN FRAN	ICISCO LLC	C	
2. (a)	4100 LEGENDARY DRIVE #280	(b)	4100 LEGENDARY DRIVE #280	
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0).	Mailing address of limited liability compan (Note: MAY BE POST OFFICE BOX)	-
	DESTIN, FL 32541	<u> </u>	DESTIN, FL 32541	
	10/10/2023		_23000465706	
3.	Date of filing/registration in Florida	4.	Document number	
	Registered Agent and Registered Office shown on the records of REGISTERED AGENT SOLUTIONS, INC. Registered Office Address (MUST BE FLORIDA STREET) 2894 REMINGTON GREEN LN. STE. A			
	TALLAHASSEE	32308		
(b)	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company	d Office addr	1021 J	
	NEW Registered Office Address:			
	1201 Hays Street			,
	Tallahassee, Fi	L_32301	<u>-</u>	
chang 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 livere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e registered lability com of the limite	I office and the business office of the registere npany, it is hereby confirmed that the change (ted liability company or as otherwise provided	ed (s)
	ILL CILMI	JILL C	CILMI, AUTHORIZED PERSON	
Sign	ature of a member or authorized representative of a member		Printed or typed name of signee	
provis the ob to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide lely reflect a change in the registered office address. I d in writing of this change.	performand od for in Che hereby conf	nce of my duties, and I am familiar with and a hapter 605, F.S. Or, if this document is being yfirm that the limited liability company has be	h the ccept filed en
<u> </u>	GRACE E. KIRBY. AS	ST. VICE F	PRESIDENT	
ាខ្លានព	are of Registered Agent \			

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00 554965