## M01000001416

(Requestor's Name)						
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PICK-UP WAIT MAIL						
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CORPORATION SERVICE COMPANY 1201 Hays Street

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

ACCOUNT NO. : 12000000195						
REFERENCE : 985399 7130991						
AUTHORIZATION: Come Sena						
COST LIMIT : \$ 25.00						
ORDER DATE : September 13, 2023						
ORDER TIME : 2:06 PM						
ORDER NO. : 985399-046						
CUSTOMER NO: 7130991						
CHANGE OF AGENT						
NAME: FRANK BRUNCKHORST CO., L.L.C.						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY						
XX PLAIN STAMPED COPY						
CONTACT PERSON: Eyliena Baker						
EXAMINER'S INITIALS:						

## 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. Na	ame of the limited liability company:FRANK BRU	NCKHORST	CO., L.L.C.			
2. (a)	1819 MAIN ST	(b)	(b) 1819 MAIN ST			
2. (11)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mai	ling address of limited liability company:  Note: MAY BE POST OFFICE BOX)		
	800		800			
	SARASOTA, FL 34236		SARASOTA	, FL 34236		
	06/21/2001	٨	10100000141	16		
3.	Date of filing/registration in Florida	4.	Do	ocument number		
5. (a)						
```	Registered Agent and Registered Office shown on the records C T CORPORATION SYSTEM		Dept. of State:	· ~2		
	Registered Office Address (MUST BE FLORIDA STREE		RALL RES			
	1200 SOUTH PINE ISLAND ROAD			DCT -		
	PLANTATION	FL_33324		FILED MII: 05 7003 OCT -3 MII: 05 TALLAHASSEE, FLORIC		
(b)	Enter name of NEW Registered Agent and/or NEW Register	red Office add	*014'	I: O		
	indicate of the second second and the second	tu omet aug	<u> </u>	OF A		
	Corporation Service Company					
	NEW Registered Office Address:					
	1201 Hays Street					
	Tallahassee	32301		·		
change agent v was/we the arti	imited liability company is not organized under the lor changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the members clearly organization or the operating agreement of the company	he registered liability com s of the limit	office and the pany, it is he ed liability compandid Cilmi, A	ne business office of the registered breby confirmed that the change(s) company or as otherwise provided in my.  Authorized Person		
	ture of a member or authorized representative of a member			inted or typed name of signee		
provisi the obli to mere notified	by accept the appointment as registered agent and a ons of all statutes relative to the proper and completigations of my position as registered agent as providely reflect a change in the registered office address. I in writing of this change.	gree to act in le performan led for in Ch I hereby con	i this capacit ce of my duti apter 605, F. firm that the	y. I further agree to comply with the les, and I am familiar with and accept S. Or, if this document is being filed limited liability company has been		
_ ~	re of Registered Agent  E. Kirby, Asst. Vice President					
Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314						

FILING FEE: \$25.00