## M0600004112

Requestor's Name)						
Address	<u>-</u>					
,						
(Address)						
City/State/Zip/Phone #)	<del></del>					
(Only/State/2.p// Hone by						
WAIT	MAIL					
Business Entity Name)						
•						
Document Number)						
Certificates of	Status					
Filing Officer:						
	City/State/Zip/Phone #)  WAIT  Business Entity Name)  Document Number)  Certificates of					

Office Use Only



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O SIMMONS MAR 14 2022



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 **866.625.0838** COGENCYGLOBAL.COM

Account#: 120000000088

Date: March	11, 2022	
Name:K	EN	
Reference #:	1606036	_
Entity Name:	CPLG F	T. MYERS L.L.C.
		n to Transact Business
Amendment		
✓ Change of Agen	t	ISSUES? CALL
Reinstatement		KEN:
Conversion		518-213-0738
Merger		
☐ Dissolution/With	drawal	
Fictitious Name		
Other		
Authorized Amount	\$25.00	
	<b></b>	
Signature		

## 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.

I. Na	me of the limited liability company:CPLG_FT. I	MYERS L.L.C.				
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)		ing address of limited liability company:  Note: MAY BE POST OFFICE BOX)		
	No Change	No Ch	ange			
3.	July 25, 2006  Date of filing/registration in Florida	4.	M06000004112  Document number			
5. (a)	CORPORATION SERVICE SHOWN ON THE RECORD SERVICE CORPORATION SERVICE CORPORATION SERVICE SHOWN ON THE RECORD SERVICE CORPORATION SERVICE CORPORATIO	<del></del>	nate:			
	Registered Office Address (MUST BE FLORIDA STREET	<u> </u>	_	2022 HAR I SECRETAL		
(b)	TALLAHASSEE FILE COGENCY GLOBAL INC.  Enter name of NEW Registered Agent and/or NEW Registere		<u>5</u> —	AR II M 7:50		
	115 North Calhoun St., Suite 4  NEW Registered Office Address:		<del></del>	-14 00	л Э	
	Tallahassee, F	1, 32301	_			
the cha agent v was/we	imited liability company is not organized under the lange or changes are made, the Florida street address owill be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the registered off inbility company, it of the limited linbi	ice and the business o t is hereby confirmed lity company or as oth	office of the re that the chan	egistered (ge(s)	
	aul R. Womble	Paul R. Wor	nble			
I here provisi the obli to mere notified ISI Ti	ture of a member or authorized representative of a member by accept the appointment as registered agent and ag ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.  m Mayville	e performance of m ed for in Chapter 6	y duties, and Lam fan 05. F.S Or. if this do	ee to comply niliar with an ocument is be	id accept ing filed	
Signatu	re of Registered Agent Tim Mayville, Assistant Se	cretary				

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