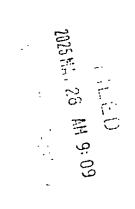
M000000 2448

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
J. HORNE				
MAY 2 9 2025				

Office Use Only



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2025 HAY 28 PH 4: 45

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

ACCOUNT NO	: I	2000000195
REFERENCI	E :	
AUTHORIZATION	₹ :	and the second
COST LIMIT	: \$	
ORDER DATE : 05/28/25		
ORDER TIME :		
ORDER NO. :		
CUSTOMER NO:		
		· • • • • • • • • • • • • • • • • • • •
CHANGE OF	AGENT	
NAME:		
PLEASE RETURN THE FOLLOWING A	S PROO	F OF FILING:
CERTIFIED COPY PLAIN STAMPED COPY		
CONTACT PERSON: shauna godbolt		
F	EXAMINE	R'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. N	ame of the limited liability company: OLEANDER HC	DLDINGS	3. L —	LLC
2. (a)		(b	o) _	
. ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	700 UNIVERSE BLVD		7	700 UNIVERSE BLVD
			_	700 GIVERGE BEVB
	JUNO BEACH, FL 33408		J —	JUNO BEACH, FL 33408
	04/26/2007			M07000002448
3.	Date of filing/registration in Florida	4.		Document number
5. (a))			
,). (cl.	Registered Agent and Registered Office shown on the records of	the Florida	a De	Dept, of State:
	LEE, DAVID M			
	Registered Office Address (MUST BE FLORIDA STREET.	ADDRESS	<u></u>	
	700 UNIVERSE BLVD			
	JUNO BEACH	22400		2025 H. 28 AM 9: 09
	JUNO BEACH	´ 		
(b)	Enter name of NEW Registered Agent and/or NEW Registered			
				. 9
	Corporation Service Company			
	NEW Registered Office Address:	_ .		
	1201 Hays Street			
		· <u> </u>		
	Tallahassee	32301		
	, r.			
If the	limited liability company is not organized under the law	vs of the	Sta	tate of Florida, it is hereby confirmed that after th
chang agent	e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia	registere ability co	24 ()mr	office and the business office of the registered opens, it is hereby confirmed that the change(s)
was/w	ere authorized by an affirmative vote of the members of	of the lim	nite	ed liability company or as otherwise provided in
	icles of organization or the operating agreement of the			• • • •
	ature of a member or authorized representative of a member			1 Pear Printed or typed name of signee
-	thy accept the appointment as registered agent and agr	aa to zw i	, i.,	
provis	ions of all statutes relative to the proper and complete	performa	anc	nce of my duties, and I am familiar with and accep-
me oo to ngi	ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely feflect a change in the registered office address, I i	rjoi in C hereby co	zad onfi	firm that the limited liability company has been
nouțio	d'id writing of this change.			
Signati	ure of Registered Agent Asst Vice President			
~	- , zisat vice i resident			