

M08000002078

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

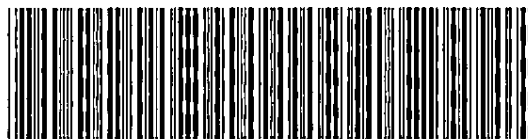
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

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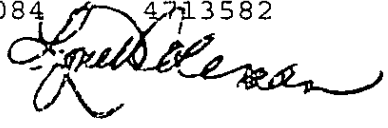
2024 FEB 13 AM 10:16  
STATE  
FILED

RECEIVED  
2024 FEB 13 PM 3:13  
ALABAMA  
SOLICITOR GENERAL'S OFFICE

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

ACCOUNT NO. : I20000000195

REFERENCE : 303084 4713582

AUTHORIZATION : 

COST LIMIT : \$ 25.00

ORDER DATE : February 1, 2024

ORDER TIME : 1:27 PM

ORDER NO. : 303084-067

CUSTOMER NO: 4713582

CHANGE OF AGENT

NAME: BLUEGREEN SERVICING LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland-sorenson

EXAMINER'S INITIALS: \_\_\_\_\_

2024 FEB 13 AM 10:16  
TALLAHASSEE, FL 32301  
CORPORATION SERVICE 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.*

<p>2. (a) <u>4960 CONFERENCE WAY NORTH</u></p> <p style="text-align: center;">Principal office address of limited liability company:  <i>(Note: <b>MUST BE STREET ADDRESS</b>)</i></p> <p>SUITE 100</p> <hr/> <p>BOCA RATON, FL 33431</p>	<p>(b) <u>4960 CONFERENCE WAY NORTH</u></p> <p style="text-align: center;">Mailing address of limited liability company:  <i>(Note: <b>MAY BE POST OFFICE BOX</b>)</i></p> <p>SUITE 100</p> <hr/> <p>BOCA RATON, FL 33431</p>
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5. (a) \_\_\_\_\_  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
CORPORATE CREATIONS NETWORK INC.

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
801 US HIGHWAY 1  
NORTH PALM BEACH FL 33408

(b) \_\_\_\_\_  
Enter name of NEW Registered Agent and/or NEW Registered Office address:

Corporation Service Company

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**NEW** Registered Office Address:

1201 Hays Street

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Tallahassee, FL 32301

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

\_\_\_\_\_  
Signature of a member or authorized representative of a member

Jill Cilmi, Authorized Person  
Printed or typed name of signee

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

Signature of Registered Agent  
Grace E. Kirby, Asst. Vice President

**FILING FEE: \$25.00**

INHS18 (2/14)