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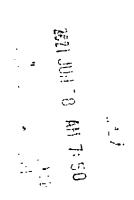
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Office Use Only



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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: June 4, 2021

Order#: 838990-030

Re: AIMC, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ami Casper c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

XX \_\_ Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

## 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: AIMC, LLC		
2. (a)	220 Cinema View Way	(b)	
(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	. (0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Woodstock, GA 30189		
	06/04/2008	M08000	002622
3.	Date of filing/registration in Florida	4.	Document number
5. (a	NRAI Services, Inc.		p.,` , a.,
J. (u	Registered Agent and Registered Office shown on the records of the	e Florida Dept. of S	tate:
	1200 South Pine Island Road		
	Registered Office Address (MUST BE FLORIDA STREET AL	ODRESS)	·
			<u> </u>
	Plantation . FL	33324	<del>고</del> ~~
(h)			
(b)	Enter name of NEW Registered Agent and/or NEW Registered O	ffice address:	<del></del>
	Corporation Service Company		
	NEW Registered Office Address:		
	1201 Hays Street		
	Tallahassee .FL	2301	
If the	limited liability company is not organized under the laws	of the State of I	Florida, it is hereby confirmed that after the
agent was/w	e or changes are made, the Florida street address of the re will be identical. Or, in the case of a Florida limited liab- ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the line	ility company, i the limited liabi	t is hereby confirmed that the change(s) lity company or as otherwise provided in
/s/ J:	Il Cilmi	Jill 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 agree ions of all statutes relative to the proper and complete pe ligations of my position as registered agent as provided f elv reflect a change in the registered office address, I hel d in writing of this change.	to act in this ca erformance of m for in Chapter 6 reby confirm tha poration Service	y duties, and I am familiar with and accept 05, F.S. Or, if this document is being filed at the limited liability company has been
Signer	Ire of Registered Agent	i M. Casper, A	sst. Vice President