

M120000003235

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

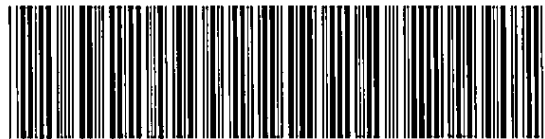
(Document Number)

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2022 FEB 14 PM 3:53

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2022 FEB 14 AM 8:13

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Y SULKER

FEB 17 2022

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

ACCOUNT NO. : I20000000195

REFERENCE : 468904 7775081

AUTHORIZATION

COST LIMIT : \$ 25.00

ORDER DATE : February 10, 2022

ORDER TIME : 2:14 PM

ORDER NO. : 468904-051

CUSTOMER NO: 7775081

CHANGE OF AGENT

NAME: TOWN COURT ALF, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker

EXAMINER'S INITIALS: _____



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 15, 2022

CSC

RESUBMIT

Please give original
submission date as file date.

SUBJECT: TOWN COURT ALF, LLC
Ref. Number: M12000003235

We have received your document for TOWN COURT ALF, LLC and the authorization to debit your account in the amount of \$. However, the document has not been filed and is being returned for the following:

The registered agent must sign accepting the designation.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Yasemin Y Sulker
Regulatory Specialist III

Letter Number: 022A00003722

2022 FEB 16 PM 3:35

**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. Name of the limited liability company: TOWN COURT ALF, LLC

2. (a) Principal office address of limited liability company:
*(Note: **MUST BE STREET ADDRESS**)*

4500 Dorr St.

Toledo, Ohio 43615

(b) Mailing address of limited liability company:
*(Note: **MAY BE POST OFFICE BOX**)*

4500 Dorr St.

Toledo, Ohio 43615

06/07/2012

M12000003235

3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

CROSS STREET CORPORATE SERVICES, LLC

Registered Office Address *(**MUST BE FLORIDA STREET ADDRESS**)*

200 S. ORANGE AVENUE

SARASOTA, FL 34236

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

Corporation Service Company

NEW Registered Office Address:

1201 Hays Street

Tallahassee, FL 32301

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2022 FEB 14 AM 8:32
TALLAHASSEE, FL

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.

/s/ Mary Ellen Pisanelli

Mary Ellen Pisanelli, Authorized Person

Signature of a member or authorized representative of a member

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.

Grace E. Kirby
Signature of Registered Agent

GRACE E. KIRBY, ASST. VICE PRESIDENT