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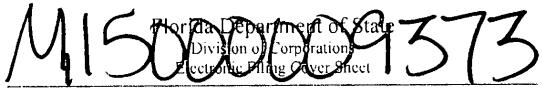
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Division of Corporations



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(((H210003909253)))



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Account Number : 113615003626 407-540-7576 Phone 407-641-8361

Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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H210003909253

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.

2. (a)			(b)	· · · · · · · · · · · · · · · · · · ·	··· <u></u>		
	Principal office address of fimited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited lie (Note: MAY BE POST O			
	450 S. Orange Avenue, 14th Floor		P.O. Box 4920				
	Orlando, FL 32801		Orlando, FL 32802-4920				
	11-19-2015		M1500	0009373			
3.	Date of filing/registration in Florida	4.		Document number			
5 (a)							
5. (a)	Registered Agent and Registered Office shown on the records of	Lihe Flor	ida Dept. of	f Starte:			
	Amy J. Patterson						
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)						
	450 S. Orange Avenue				_		
	Orlando , F	32801			SECI ALLA	2021 OCT 20	
	,,	~			五百	30	
(h)					SS	7 2	T
, ,	Enter name of NEW Registered Agent and/or NEW Registered Office address:				EE.		IT
	Truccy B. Bracco				F STAI	₽	Ö
	NEW Registered Office Address:	· · · · · · · · · · · · · · · · · · ·	<u> </u>	_ 	AIE		
	450 S. Orange Avenue, 14th Floor				A	20	
	Orlando	32801					
change agent vivas/workhe artification of the colling of the colli	imited liability company is not organized under the later changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited libration of the authorized by an affirmative vote of the members etes of preanization or the operating agreement of the area of a member or authorized representative of a member by accept the appointment as registered agent and agoing of all statutes relative to the proper and complete in the registered agent as provided by reflect a change in the registered office address, I thin writing of this change.	e registeriability of the lie of the limited The rece to a experior to a	ered offic company imited lia d liability racey B. B act in this mance of	e and the business office of, it is hereby confirmed that bility company or as otherw company. racco Printed or typed name of signification. Capacity. I further agree to my duties, and I am familia 605. F.S. Or if this documents.	the registered the change(s) vise provided in the change of the change o	in the cept led	