MICCCCC 308C

(Re	questor's Name)	
(Add	dress)	
- (Ad	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	

Office Use Only



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12/07/20--01021--010 **25.00



O SIMMONS JAN 25 2021



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: December 3, 2020

Order#: 529476-023

Re: ENSUREM II, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

 \overline{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.

 \overline{XX} Please return evidence to the following:

Attn: Erika Zavala Daza c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

 \underline{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. Na	ame of the limited liability company:ENSUREM II, L	LC.							
2. (a)	15500 Roosevelt Blvd Ste 304			(b) 15500 Roosevelt Blvd Ste 304					
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0	, <u>—</u> —	-	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	Clearwater, FL 33760		Clea	rwater, FL 33760			<u> </u>		
	04/11/2016		M1600	00003080					
3.	Date of filing/registration in Florida	4.		Document no	umber				
5. (a)	REGISTERED AGENTS INC								
J. (a)	Registered Agent and Registered Office shown on the records of	f the Florida	Dept. o	of State:					
	7901 4TH STREET NORTH				so.	2			
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	2		75. 75.	20 28 DEC			
	ST.PETERSBURG, F	L				C-7 AM			
(b)	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company	d Office ad	dress:		四部	7: 53	U		
	NEW Registered Office Address:			<u></u>					
	1201 Hays Street								
	Tallahassee, F	L							
change agent v was/w	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members icles of organization or the operating agreement of the /s/ Jill Cilmi	e registere iability co of the lim e limited li	d office mpany ited lia iability	ce and the business	s office of t irmed that t r as otherwi	he regi: he chai	stered nge(s)		
Signa	signature of a member or authorized representative of a member			Printed or typed name of signee					
I here provisi the obi	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	ree to act e performa ed for in C hereby co	in this ince of hapter infirm	capacity. I furthe	er agree to i	comply	with the nd accept zing filed s been		
	Draze L-Kuby								
Signatu	ire of Registered Agent								

FILING FEE: \$25.

Grace E. Kirby, Asst. Vice President of Corporation Service Company

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