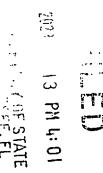
M16000007412

(Requestor's Name)				
(Address)				
(Address)				
(City	//State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



100408986511





CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195					
REFERENCE : 810519 8406442					
AUTHORIZATION: Symbolic Rade					
COST LIMIT : \$ (25).00					
ORDER DATE : June 12, 2023					
ORDER TIME : 9:44 AM					
ORDER NO. : 810519-010					
CUSTOMER NO: 8406442					
CHANGE OF AGENT					
NAME: BSWIFT LLC					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY					
AA PHAIN SIAMPED COPI					
CONTACT PERSON: Alexxis Weiland-sorenson					
EXAMINER'S INITIALS:					

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: BSWIFT LLC			
		(b)	
` '	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`	,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BON)
	10 South Riverside Plaza Suite 1100		151 Farr	nington Avenue RW61
	Chicago, IL 60606		Hartford,	CT 06156
	09/16/2016		M160000	07412
3.	Date of filing/registration in Florida	 4.		Document number
5. (a)				
υ. (a)	Registered Agent and Registered Office shown on the records of C T CORPORATION SYSTEM	the Florid	a Dept. of Sta	ite:
	Registered Office Address (MUST BE FLORIDA STREET)	2023		
	1200 SOUTH PINE ISLAND ROAD			
	PLANTATION . FL	33324		
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> Corporation Service Company	Office at	ldress:	PH 4: 01 SSEE. FL
	NEW Registered Office Address:			
	1201 Hays Street			_
	Tallahassee, FL	32301		_
change agent v was/w	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	register ability co of the lin limited	ed office ar ompany, it i nited liabili liability cor	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in inpany.
,,,	John Herbst		ohn Herbst	. Authorized Person
Signa	ture of a member or authorized representative of a member			Printed or typed name of signee
provisi the obi to mer	hy accept the appointment as registered agent and agr ions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address. I l d in writing of this change.	ee to ac perform I for in (iereby c	in this cap ance of my Thapter 60. Onfirm that	pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
Signatu	Those C-Kubi	GRACE	E. KIRBY	ASST. VICE PRESIDENT