

Mile0000009520

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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JAN 11 2022
ALBRITTON



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2022 JAN 10 AM 11:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

January 6, 2022

CSC

RESUBMIT
Please give original
submission date as file date.

SUBJECT: PBH STONECASTLE, LLC
Ref. Number: M16000009520

original file date
1/5/22

We have received your document for PBH STONECASTLE, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current Registered Agent listed is not the current Registered Agent listed on our records.

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.

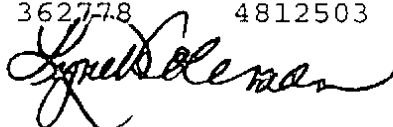
Terri J Schroeder
Regulatory Specialist III

Letter Number: 122A00000361

RESUBMIT

Please give original
submission date as file date.

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

ACCOUNT NO. : I20000000195
REFERENCE : 362778 4812503
AUTHORIZATION : 
COST LIMIT : \$ 25.00

ORDER DATE : January 5, 2022
ORDER TIME : 1:40 PM
ORDER NO. : 362778-010
CUSTOMER NO: 4812503

CHANGE OF AGENT

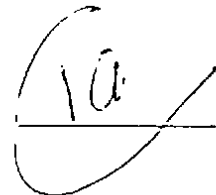
NAME: PBH STONECASTLE, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland

EXAMINER'S INITIALS:



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PBH Stonecastle, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gina Winne

Name of Person

Faegre Drinker Biddle Reath

Firm/Company

801 Grand Avenue, 33rd Floor

Address

Des Moines, IA 50309

City/State and Zip Code

ashley.zupp@bhmanagement.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gina Winne _____ at (515) 988-5187
Name of Person Area Code & Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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: PBH Stonecastle, LLC

2. (a) 400 Locust Street, Suite 790, Des Moines, IA 50309 (b) 400 Locust Street, Suite 790, Des Moines, IA 50309
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

3. November 29, 2016 4. M16000009520
Date of filing/registration in Florida Document number

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

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

777 Brickell Avenue, Suite 1200

Miami, FL 33131

(b) Corporation Service Company

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

NEW Registered Office Address:

1201 Hays Street

Tallahassee, FL 32301

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.

Jennifer Schumann
Signature of member or authorized representative of a member

Jennifer Schumann

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.

Alexis Weibull, assistant vice president
Signature of Registered Agent

2017-11-29 11:52