M17000004327

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
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A. BUTLER DEC - 7 2022 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT N	iO. :	12000000	0195
REFEREN	ICE :	175836	7487363
AUTHORIZATI	ON :	Levels	Cleman
COST LIM	IIT :	\$ 25.00	The Market of the Control of the Con
ORDER DATE : December 2, 2	:022		
ORDER TIME : 8:55 AM			
ORDER NO. : 175836-008			
CUSTOMER NO: 7487363			
<u>CHANGE O</u>	F AGEN	<u>T</u>	
NAME: ENDURANCE	SEARCH	PARTNERS	, LLC
PLEASE RETURN THE FOLLOWING	AS PR	OOF OF FI	LING:
CERTIFIED COPY XX PLAIN STAMPED COPY			
CONTACT PERSON: Eyliena Ba	ker		
	EXAMII	NER'S INI	TIALS:

. 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: ENDURANCE	SEARCH	PARTNER:	S, LLC				
_, ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		`	Mailing address (Note: MAY)	of limited li	ability co	ompany:	
	11760 US Highway 1 N Ste W506		11760 US	0 US Highway 1 N Ste W506				
	N Palm Beach, FL 33408		N Palm Be					
	05/22/2017		M17000004	4327				
3.	Date of filing/registration in Florida	4.		Document nu	umber			
5. (a)								
()	Registered Agent and Registered Office shown on the records of NATIONAL REGISTERED AGENTS, INC.	of the Florida	Dept. of State	- ::				
	Registered Office Address (MUST BE FLORIDA STREE		-					
	1200 SOUTH PINE ISLAND ROAD					202		
	PLANTATION F	133324		-		2022 DEC	, <u></u>	
(b)						9		
,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ed Office add	Office address:					
	Corporation Service Company			_	11 N	MH 9: 1.5	السب	
	NEW Registered Office Address:			-	, , ,	٥.		
	1201 Hays Street			_				
	Tallahassee, F	32301		_				
change agent v was/w	imited liability company is not organized under the last or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited later authorized by an affirmative vote of the members icles of organization or the operating agreement of the control of t	ne registered liability con s of the limited li se limited li	d office and apany, it is ted liability ability com	I the business hereby confi company or	office of irmed that	the reg	istered ange(s)	
Signa	turp of a member or authorized representative of a member		Printed or type	d name of si	gnee			
provisi the obl to mero notified	by accept the appointment as registered agent and as ions 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, if d in writing of this change.	gree to act i e performa led for in Ci I hereby coi	n this capa nce of my a napter 605, ifirm that t	icity. I furthe luties, and I a .F.S. Or, if t he limited lia	r agree to m familia his docum bility com	compler with it ent is to pany h	y with the and accept being filed as been	
Signatu	Mac. 1-Kubl re of Registered Agent							
السبيات	to or tregionered regent - 1							

Grace E. Kirby, Asst. Vice President
Division of Corporations ● P.O. Box 6327 ● Tallahassee, FL 32314
FILING FEE: \$25.00