

M1700000 7056

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

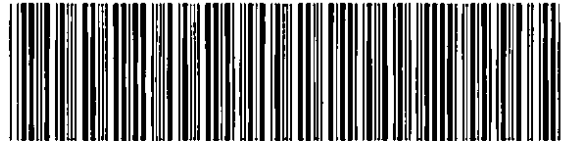
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

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2022 JUL 28 AM 8:55

SECRETARY OF STATE
TALLAHASSEE, FL

A. BUTLER
JUL 29 2022

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

ACCOUNT NO. : I20000000195

REFERENCE : 828827 8375080

AUTHORIZATION :

COST LIMIT : 25.00



ORDER DATE : July 22, 2022

ORDER TIME : 9:11 AM

ORDER NO. : 828827-007

CUSTOMER NO: 8375080

CHANGE OF AGENT

NAME: EVERGREEN ATM LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Eyllena Baker

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. Name of the limited liability company: EVERGREEN ATM LLC

2. (a) _____ (b) _____
 Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) *(Note: MAY BE POST OFFICE BOX)*

7901 4th St N STE 300

7901 4th St N STE 300

ST Petersburg, FL 33702

ST Petersburg, FL 33702

08/16/2017

M17000007056

3. _____ Date of filing/registration in Florida 4. _____ Document number

5. (a) _____
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

NORTHWEST REGISTERED AGENT LLC.

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

7901 4TH STREET N, SUITE 300

ST.PETERSBURG, FL. 33702

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 TALLAHASSEE, FL

(b) _____
 Enter name of NEW Registered Agent and/or NEW Registered Office address:

Corporation Service Company

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.

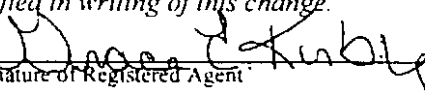
/s/ JILL CILMI

JILL CILMI, AUTHORIZED PERSON

Signature of a member or authorized representative of a member

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.


 Signature of Registered Agent

GRACE E. KIRBY, ASST. VICE PRESIDENT