M17000007246

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-U	
	(Business Entity Name)
	(Document Number)
:i Copies	Certificates of Status
	s to Filing Officer:
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A. BUTLER

DEC 14 2022

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

	ACCOUNT NO.	:	12000000195	
	REFERENCE	:	182165	8308085
	AUTHORIZATION			0
	COST LIMIT	:	\$ 25 Quell	dene
ORDER DATE :	December 6, 2022			
ORDER TIME :	10:57 AM			
ORDER NO. :	182165-022			
CUSTOMER NO:	8308085			
				- -

CHANGE OF AGENT

NAME: COMMONWEALTH EQUITY SERVICES, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPYXXPLAIN STAMPED COPY

CONTACT PERSON: Eyliena 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. N	ame of the limited liability company:	EALTH EQ	UITY SERV	ICES, LLC			
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(Mailing address of limited liability company: (<u>Note: MAY BE POST OFFICE BOX</u>)			
	29 SAWYER ROAD		29 SAWY	ER ROAD			
	WALTHAM, MA 02453		WALTHA	M, MA 02453			
	08/21/2017		M1700000	7246			
3.	Date of filing/registration in Florida	4.		Document number			
5. (a)							
()	Registered Agent and Registered Office shown on the records NRAI SERVICES, INC.	s of the Florid	la Dept. of State	-			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)						
	1200 SOUTH PINE ISLAND ROAD						
	PLANTATION	FL_33324		2022			
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>						
	The finance of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	rea Ornee ao	<u>uaress</u> :				
	Corporation Service Company			୍ରା <u>କ</u> ଜୁନ ପ୍ର ପ୍ର			
	NEW Registered Office Address:		-	<u>ី</u> ភ្			
	1201 Hays Street			ω_{10}			
	Tallahassee	FL_32301					
change agent v was/w the arti	imited liability company is not organized under the or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited ee authorized by an affirmative vote of the member idee of organization or the operating agreement of t	laws of the the register l liability co s of the lin he limited	ed office and ompany, it is nited liability liability com	I the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany. rized Person			
	the of a member or authorized representative of a member			Printed or typed name of signee			
provisi the obl	by accept the appointment as registered agent and a ons of all statutes relative to the proper and comple igations of my position as registered agent as provi- ely reflect a change in the registered office address, in writing of this charge.	ete perform	ance of my a	luties, and I am familiar with and accept-			
人	re of Registered Agent	<pre></pre>	irace E. Kirb	y, Asst Vice President			
	Division of Corporations• P.C). Box 632	7• Tallahas	see, FL 32314			
		FEE: \$25					

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