M18000000430

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Joil 1

CORPORATION SERVICE COMPANY 1201 Hays Street

CONTACT PERSON: Alexxis Weiland

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195 REFERENCE : 342516, AUTHORIZATION : COST LIMIT : \$ 25.00 ORDER DATE: December 21, 2021 ORDER TIME : 10:50 AM ORDER NO. : 342516-215 CUSTOMER NO: 156084A CHANGE OF AGENT NAME: ERMC, LLC PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY
XX PLAIN STAMPED COPY

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. Na	ame of the limited liability company:			
2. (a)	3399 Peachtree Road NE		(b) 3399 Peachtree Road NE	
- (-,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(*)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Suite 1500		Suite 150	00
	Atlanta, GA 30326		Atlanta, (GA 30326
	01/16/2018		M1800000	00430
3.	Date of tiling/registration in Florida	4.		Document number
5. (a)	CT CORPORATION SYSTEM			
(b)	Registered Agent and Registered Office shown on the records of 1200 SOUTH PINE ISLAND ROAD	the Flo	rida Dept. of Sta	le:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
	PLANTATION FI.	3332	4	2022 JAN 18 SECINE AND TALLAND
	Enter name of NEW Registered Agent and/or NEW Registered Office address: Corporation Service Company			MHIO: 21
	NEW Registered Office Address:			_
	1201 Hays Street			_
	Tallahassee FI	3230	1	_
change agent v was/we the arti Signat	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 the authorized by an affirmative vote of the members of cles of organization or the operating agreement of the ture of a member or authorized representative of a member on authorized representative of a member on so of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address. If	regist ability of the l limite	ered office an company, it i imited liability distributed liability corill Cilmi, Authority to the this can	of the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in inpany. Printed or typed name of signee
попрієс	l'in writing of this change. Loose CKUby To of Registered Agent	.c. c./j.	conjum mar	me manu naomi, company nas ocen
Signatur	re of Registered Agent			

Grace E. Kirby, Asst. Vice President of Corporation Service Company