8/20/2019

Division of Corporations



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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: 2. (a) Principal office address of limited lia (Note: MUST BE STREET A 210 JOHN CLENN DR SUITE 10 AMHERST, NY 14228 03/19/2018 Date of filing/registration in	ability company: ADDRESS) 21	Mailing address of limited I (Note: MAY BE POST OF 10 JOHN GLENN DR SUITE 10 MHERST, NY 14228	
Principal office address of limited lie (Note: MUST BE STREET A 210 JOHN CLENN DR SUITE 10 AMHERST, NY 14228 03/19/2018	ability company: ADDRESS) 2	Mailing address of limited I (Note: MAY BE POST 0 10 JOHN GLENN DR SUITE 10	
AMHERST, NY 14228 03/19/2018	. A		• ••
03/19/2018		MHERST, NY 14228	•
Date of filing/registration in	MI	8000002729	
2 41 5 1 11 11 B 1 - B 10 1 41 1 1 1	ı Florida 4.	Document number	
(a) CORPORATION SERVICE COMPAN	ΙΥ	•	
Registered Agent and Registered Office show	on the records of the Florida Dep	pt. of State:	18
Registered Office Address (MUST BE F)	T.ORIDA STREET ADDRESS)		AUG Cult
1201 HAYS STREET			지 : - 1 : 1 : 1 : 1 : 1 : 1 : 1 : 1 : 1 : 1
TALLAHASSEE	32301-2525	· ·	
TALLAHASSEE	, FL	-	24,
C T Corporation System		; ·	10:02
Enter name of NEW Registered Agent and/o		<u> </u>	
NEW Registered Office Address:		•	
1200 South Pine Island Road		*	
Blonzasion	33324	. •	
Plantation	JFL 33324		·

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FH.ING FEE: \$25.00