

MIS 000003382

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

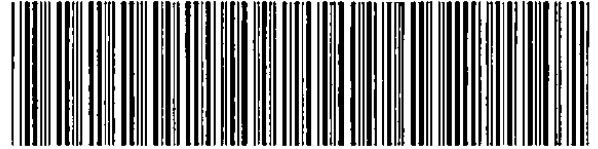
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2023 FEB -2 AM 10:38

DIRECTOR'S OFFICE
CORPORATION
TALLAHASSEE, FLORIDA

2023 FEB -2 AM 11:36

A. BUTLER

FEB -3 2023

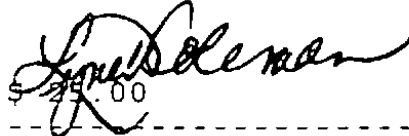
CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I200000000195

REFERENCE : 422574 7941640

AUTHORIZATION :

COST LIMIT : \$ 25.00



ORDER DATE : January 31, 2023

ORDER TIME : 4:27 PM

ORDER NO. : 422574-004

CUSTOMER NO: 7941640

CHANGE OF AGENT

NAME: CAMPBELL & BRANNON, L.L.C.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN 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. Name of the limited liability company: CAMPBELL & BRANNON, L.L.C.
2. (a) 5565 GLENRIDGE CONNECTOR
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
SUITE 350
ATLANTA, GA 30342
- (b) 5565 GLENRIDGE CONNECTOR
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
SUITE 350
ATLANTA, GA 30342
3. 04/06/2018 Date of filing/registration in Florida
4. M18000003382 Document number
5. (a) INCORP SERVICES, INC.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
17888 67TH COURT NORTH
Registered Office Address (Note: MUST BE FLORIDA STREET ADDRESS)
LOXAHATCHEE, FL 33470
- (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 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/ Camille W. Brannon

Camille W. Brannon, Manager

Signature of a member or authorized representative of a member

Printed or typed name of signer

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.

Grace E. Kirby
Signature of Registered Agent

Grace E. Kirby, Asst. Vice President

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00