

5/6/2019

2019-05-13 14:20:13 ESR

19542080845 From Ranae McGraw

MI0005403

Division of Corporations
Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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**LLC REGISTERED AGENT CHANGE
A-LIGN HOLDCO, LLC**

Certificate of Status	0
Certified Copy	1
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May 7, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

A-LIGN HOLDCO, LLC
400 N ASHLEY DR SUITE 1325
TAMPA, FL 33602

SUBJECT: A-LIGN HOLDCO, LLC
REF: M18000005403

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The form you submitted is for a CORP, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott
Regulatory Specialist II

FAX Aud. #: H19000149422
Letter Number: 019A00009109

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: A-Lign Holden, LLC

2. (a) Principal office address of limited liability company.
(Note: MUST BE STREET ADDRESS)

400 N ASHLEY DR SUITE 1325

TAMPA, FL 33602

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

6-7-2018

ML18000005403

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

TK Registered Agent Inc

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

161 E Kennedy Blvd Suite 2700

TAMPA, FL 33602

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

C T Corporation System

NEW Registered Office Address:

1200 South Pine Island Road

Plantation, FL 33324

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.

Signature of a member or authorized representative of a member

Jessica Eisele

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.

Angel Shearer

By: Angel Shearer Assistant Secretary

Signature of Registered Agent

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

INHS1X (2/14)