

M18000005921

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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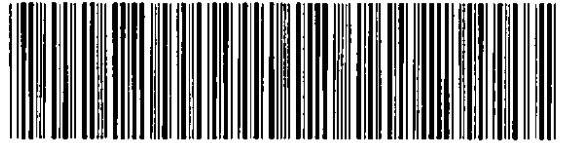
(Business Entity Name)

(Document Number)

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OFFICE OF REGISTRATION
TALLAHASSEE, FLORIDA

2022 JUN 28 AM 11:25

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2022 JUN 28 PM 12:44

FILED

A. RAMSEY
JUN 29 2022

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

ACCOUNT NO. : I20000000195
REFERENCE : 773206 7226307
AUTHORIZATION : *Lyndee A. Man*
COST LIMIT : \$ 25.00

ORDER DATE : June 27, 2022
ORDER TIME : 8:23 AM
ORDER NO. : 773206-004
CUSTOMER NO: 7226307

CHANGE OF AGENT

NAME: AW MEMORIAL SOUTH, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland

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: AW MEMORIAL SOUTH, LLC

2. (a) <u>11780 U.S. HIGHWAY ONE</u> Principal office address of limited liability company: <i>(Note: MUST BE STREET ADDRESS)</i> <u>SUITE 305</u> <u>NORTH PALM BEACH, FL 33408</u>	(b) <u>11780 U.S. HIGHWAY ONE</u> Mailing address of limited liability company: <i>(Note: MAY BE POST OFFICE BOX)</i> <u>SUITE 305</u> <u>NORTH PALM BEACH, FL 33408</u>
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3. <u>06/11/2018</u> Date of filing/registration in Florida	4. <u>M18000005921</u> Document number
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5. (a) JONES FOSTER SERVICE, LLC
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
505 S. FLAGLER DR., STE. 1100

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*
WEST PALM BEACH, FL 33401

(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 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.

<u>/s/ Brian K. Waxman</u> Signature of a member or authorized representative of a member	<u>Brian K. Waxman, President</u> Printed or typed name of signee
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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 of Corporation Service Company

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

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2009 JUN 28 PM 12:44
TALLAHASSEE, FL